ServSafe Enrollment Form

Today's Date:						
Name (Print):						
Mailing Address:						
					de:	
Home Phone:			Cell Phone:	i		
E-mail:						
Business Address	:					
City:		_	State:	Zip Cod	de:	
Business Phone N	lumber:					
Where do you war						
Have you taken S	ervSafe before?	First	Time	_Recertifying _	Retesting	
Large-print exam	needed?	_Yes	No			
Please return thi	• •				registration fee of \$125 ative Extension.	
Hand Deliver to:						
Cooperative Exter O. P. Owens Agrid 455 Caton Road Lumberton, NC 28	culture Center 3360					
harassment regardless of sex (including pregnancy	N.C. A&T State University a f age, color, disability, famil), sexual orientation, and ve	y and marital status eteran status. NC Sta	nitted to positive act , gender identity, ge ate, N.C. A&T, U.S. [netic information, national Department of Agriculture,	tunity and prohibit discrimination and origin, political beliefs, race, religion, and local governments cooperating.	
		Offic	ce Use Only			
Amount Paid	Date Paid			Check/Money Order #		
Rec #	Collected by		Admi	in Rec #	Acct Health Ed	