

Name: _____

Position: _____

Years in Position: _____ Years with Company: _____

DOB: _____

E-mail Address: _____

Primary Phone #: _____(O)__(C)__(H)____ Secondary Phone #: _____(O)__(C)__(H)____

Home Address: _____

COMPANY INFORMATION

Company Name: _____

Address: _____

Website: _____

Name of Company Sponsor: _____ Position: _____

Sponsor Phone #: _____ Sponsor Email: _____

Cost of the program is \$5995- A Non-Refundable \$1500 deposit is due at signing. The balance is due 10 days before the first class.
 A monthly payment option is available with \$1500 down and \$450 a month for 11 months.

Make check payable to: BOAR Mailing address: BOAR 9115 W Russell Rd, Suite 210, Las Vegas, NV 89148 Email: info@BOARCommunity.com
 Cancellation Policy: Up until the completion of the first meeting, a full refund will be granted. Until the third meeting, a pro-rated credit will be granted.
 If a participant leaves the program for any reason after the first quarter, no refund will be granted.

Applicant Signature: _____ Sponsor Signature: _____

Title: _____ Date: _____ Title: _____ Date: _____

This \$5,995 program consists of four full days and eight half days over the course of 12 months.
 July 25, 2022 will be a virtual orientation from 8:30 a.m. - 10:00 a.m.

July 25, 2022 - Virtual Orientation	August 23, 2022	December 27, 2022	April 25, 2023
	September 27, 2022	January 24, 2023	May 23, 2023
Black Dates = Full Day	October 25, 2022	February 28, 2023	June 27, 2023
White Dates = Half Day	November 22, 2022	March 28, 2023	July 25, 2023

BILLING OPTIONS

Pay in Full: \$5,995 Paid in Full **Monthly Payment Option:** \$450 a month for 11 months with \$1500 due at Signing

Option one: ACH

Routing Number: _____ Accounting Number: _____

Account Type: Checking Savings Consumer Business

Option two: Credit Card

Card Holder Name (as shown on card): _____

Card Number: _____ Expiration Date (mm/yy): _____ Zip Code: _____

Card Type: Visa MasterCard American Express

I, _____, authorize BOAR to process the agreed upon payment according to the terms selected above. I understand that my information will be saved on file for future transactions on my account.

Payment Authorized Signature: _____ Date: _____



www.boarcommunity.com
855-922-BOAR (2627)