

**SUCCESSFUL SUBROGATION I:  
A Correspondence Course for Restoration Contractors  
(formerly called Successful Subrogation)**

**Directions:**

This form is to be used for ordering student study materials for Successful Subrogation I: A Correspondence Course for Restoration Contractors. *All course participants are required to complete this course before taking Successful Subrogation II: An Advanced Course for Restoration Contractors.* Each course comes with detailed instructions.

**Course Registration Fees:**

For your firm's initial order the first person registering from your firm the registration fee is \$85, for the second person registering from your firm the registration fee is \$55, and, for all of those *after* the first two registrations, the fee is \$50. All additional orders beyond your firm's initial order cost \$60 each.

**Payment:** Check (payable to William Stewart Associates, Inc. and mailed to address at bottom), or credit card information (mailed or faxed to 732-942-0412 – no phone orders please).

**Who Should You Order Student Study Materials for?**

- Any person in your firm that may be the first person at the scene of a loss.
- Anyone who writes estimates.

Please provide (print) the following information:

Name of Person Ordering Materials:		
Company Name:		
Company Address:		
Phone No.		Fax No.
<b>Quantity</b>	<b><u>Initial Orders Only</u></b>	<b>Amount</b>
1	The first set costs \$85	\$85
1	The second set costs \$55 - fill in \$55 under "Amount" if you are ordering more than one set.	
	Indicate the quantity of the sets you are ordering beyond the first two, and multiply this number by \$50 and fill in total under "Amount."	
	<b>All additional orders</b> (beyond your firm's initial order) cost \$60 each. Indicate your order quantity, multiple by \$60 and fill in total under "Amount."	
	<b>TOTAL</b>	

Credit Card Information: (Visa, Mastercard, Amex, Discover) fax credit card orders to 732-942-0412)

Credit Card Number:

Expiration Date:     Security Code:

Name (as it appears on credit card) \_\_\_\_\_

Billing Address (Street or P.O. Box) \_\_\_\_\_

(City, State, Zip) \_\_\_\_\_

Signature \_\_\_\_\_

*Claims Training Services, A Service of William Stewart Associates, Inc.  
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(732) 942-0411, (732) 942-0412 (fax)*