



Certified ServSafe Instructor

SERVSAFE CLASS REGISTRATION FORM

This course is primarily to certify managers and will require a written examination. A certificate will be issued upon satisfactory completion of the course and will be valid for (5) five years. **Registration is complete when your form & fee are received by our office. Your textbook will be provided at registration and should be reviewed prior to class attendance. Should you have any questions, please feel free to call 478-751-6403 or email Richard.Craft@dph.ga.gov.**

STUDENT INFORMATION

Name:		
Mailing Address:		
City:	State:	Zip:
Email:	Phone:	

EMPLOYER INFORMATION

Name of Facility:		
Mailing Address:		
City:	State:	Zip:
Phone:	Fax:	

FEE: Full Course (including materials) \$ 130.00

PLEASE SELECT A LANGUAGE PREFERENCE FOR PRINTED MATERIALS:

Textbook: English Spanish Chinese
Exam: English Chinese Korean Spanish Japanese

CLASS DATE: _____

TIME: 9 AM TO 4 PM

LOCATION: North Central Health District
Room LL003
201 2nd Street
Macon, GA 31201

**Please make checks payable to: North Central Health District and mail with your completed registration form to: Attn: ServSafe Richard Craft
North Central Health District
201 2nd Street, Suite 1100
Macon, GA 31201**

(For office use only)	Date Paid: _____	Check/Charge/Money Order: _____	Book: _____
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