



# AlarmTechTraining.net

## I.D. BADGE ORDER FORM

Authorized DBPR Provider #473

Please Print:

DATE \_\_\_\_\_

Student / Employee Legal Name: \_\_\_\_\_

Student / Employee Signature Box (please sign **within** the box)

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Qualifier: \_\_\_\_\_ FL State Lic # \_\_\_\_\_

Qualifier/ License Holder Signature Box (please sign **within** the box)

*NOTE: It is the employer's responsibility to insure their personnel have met the requirements of all Florida Statutes, and F.S. 489 part II. The employer and employee will hold Alarm Tech Training LLC 'harmless for any misrepresentation. False statement, omissions, errors or incomplete actions either on the part of the company or the employee.*

If you purchased a course with ID Card, please complete this form and digitally attach form and photo to: [support@alarmtechtraining.net](mailto:support@alarmtechtraining.net)

If you ordered a replacement card, please complete this form and digitally attach form, last FASA BASA Card, and photo to: [support@alarmtechtraining.net](mailto:support@alarmtechtraining.net)