

ServSafe Enrollment Form

Today's Date: _____

Name (Print): _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

E-mail: _____

Food Service Establishment: _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone Number: _____

Where do you want your test scores sent? _____ Home _____ Work

Have you taken ServSafe before? _____ First Time _____ Recertifying _____ Retesting

Do you plan to attend the review session? _____ Yes _____ No

Large-print exam needed? _____ Yes _____ No

Please return this application no later than October 11 with your registration fee of \$125 - check or money order (ONLY), made payable to Robeson County Cooperative Extension.

Mail to:

OR

Hand Deliver to:

Janice Fields /Denese Prevatte
Cooperative Extension
P. O. Box 2280
Lumberton, NC 28359-2280

Cooperative Extension
O. P. Owens Agriculture Center
455 Caton Road
Lumberton, NC 28360



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Office Use Only

Amount Paid _____ Date Paid _____ Check/Money Order # _____

Rec # _____ Collected by _____ Admin Rec # _____ Acct Health Ed