



WALTON SCHOOL OF AUCTIONEERING ENROLLMENT FORM

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____

Business Phone: _____

Mobile Phone: _____

E-mail: _____

☐ Please enroll me in the: _____ (please indicate month and year)

☐ Enclosed is my \$100 non-refundable deposit (Balance of \$1,350 due the first day of class)

☐ Enclosed is my full tuition of \$1,450 (\$1,350 if sent so that it is received 30 days or more in advance of class)

☐ I have already registered online using PayPal through the website.

Please make checks payable to: **Walton and Associates Group, LLC.**

Please mail this enrollment form to: **Walton and Associates Group, LLC.
7996 Boneta Rd. Ste. B
Wadsworth, Ohio 44281
(330)607-368**