



DATCS, LLC.  
PO Box 5819  
Longview, TX 75605  
903-234-1136  
customerservice@datcs.com

DOT Supervisor training August 28th  
DATCS Longview  
4000 Hwy 259 N Longview, TX 75605

**Mail, Fax, or E-mail this form to:**

DATCS  
P.O. Box 5819  
Longview, TX 75608  
Fax: (903) 234-9060

E-mail: [accounting@datcs.com](mailto:accounting@datcs.com)

**Company Address:**

Company Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
City, State, ZIP \_\_\_\_\_  
Phone & Fax \_\_\_\_\_

**DEADLINE FOR REGISTRATION: August 22th 2025**

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

*Training certificates will be handed out after the class. Please PRINT the names on the registration form as you want them to appear on the certificates.*

**FEE: \$150/person (\$50 non refundable deposit charged upon sign-up.)**

**Person(s) Attending:**

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

Contact person: \_\_\_\_\_ Contact Phone #: \_\_\_\_\_

Contact E-mail: \_\_\_\_\_



Payment Method  Check (can be mailed with registration form)

Name on Credit Card \_\_\_\_\_ Visa \_\_\_\_\_ MasterCard \_\_\_\_\_ Discover \_\_\_\_\_ Amex \_\_\_\_\_ Invoice my account

Card# \_\_\_\_\_ CVVCode: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Billing ZIP: \_\_\_\_\_

**Please call our Customer Service Department at 903-234-1136 if you have any questions**

[customerservice@datcs.com](mailto:customerservice@datcs.com)