



PARENT'S TOOLSHOP CONSULTING, LTD.

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PARENTS TOOLSHOP GROUP FACILITATOR CERTIFICATION VIDEO TRAINING AGREEMENT

Training Applicant's Name (print): _____

I have participated in a screening interview with my Liaison (name): _____

He/She has accepted/approved me to participate in the Parents Toolshop Group Facilitator Certification VIDEO Training program.

I AGREE TO: (check each box)

- Pay the training fee of \$_____ to register for the training and receive my tapes. I understand the training kit will not be shipped until PTC receives payment for the training.
- Use these copyrighted tapes for my own personal training needs. I agree not to copy, share, show or distribute them to anyone else without the expressed *written consent* of Ambris Publishing.
- Complete the training program by the six-week deadline, which PTC will outline in a confirmation letter to me and enclose in my training kit.
- Call the specified contact number for my liaison and pay for any long-distance phone charges to participate in processing interviews or support calls from my Group Facilitator Certification Liaison. I will also pay for my training submission package postage or other unexpected expenses involved in this training. (The expenses stated above are the only expenses PTC anticipates a participant will incur.)
- I understand that I can cancel my request to participate in the Group Facilitator certification video training within 14 days of the kit's ship date. If I do this, I will promptly return the training kit in its *original packaging* and in *resalable* condition. I understand PTC will retain a \$50 interview and processing fee. If I cancel *after* this deadline, I understand my training fee is non-refundable, but I can apply the remaining credit toward any Parents Toolshop training program or Ambris Publishing product, including an in-person certification training program.
- If I decide to discontinue this training, I will contact PTC or my liaison and explain my reasons. I understand that anyone who drops out of this training and avoids contact with PTC or fails to inform PTC of such a decision in a timely, open, honest, responsible and professional manner will jeopardize any future attempt to become a certified instructor.

Signature: _____

Date: _____

MAIL this signed agreement and your training fee to PTC (see address above) to begin the training.