

2026 Manitowoc Ice Service School Registration Form

Business Name: _____

Main Address: _____

City, State, ZIP: _____

Telephone: _____ Fax: _____

Contact Name: _____

(Circle Day)

Attendance Information

Attending School on **January 14th** or **January 15th**

Attendee 1: _____ Phone: _____

Attendee 2: _____ Phone: _____

Attendee 3: _____ Phone: _____

Attendee 4: _____ Phone: _____

Attendee 5: _____ Phone: _____

Payment Information

_____ Business Check

_____ Credit Card (CALL OFFICE WITH CC INFO) 504-734-5024

_____ On-Account (for customers with qualifying Acct.'s with Southern Ice)

_____ Cash