



Mobile County Health Department

Department of Food & Lodging
Onsite Food Handler Class
Agreement

I, the undersigned, agree to pay the Mobile County Health Department the sum of \$45.00 (forty-five dollars), to conduct an onsite food handler class at the location listed below. I understand that this sum is payable in advance, at least three (3) working days prior to the date of the class and is not-refundable. I further agree that at least 15 participants will be present for the class and that each will be required to pay \$15.00 (fifteen dollars) for a Food Handler Card to be issued by the Mobile County Health Department. I understand that at the time of the class should fewer than 15 persons be present the class will be canceled and the \$45.00 fee will be forfeited.

Signed: _____
(Please print)

Title: _____ Date: _____

Name of Establishment _____

Address _____

Location of Class _____ Date of Class _____

Amount Paid: _____ Environmentalist _____