



Victoria Friendly Customer Service Program Application

Date:			
Business Name:			
Address:			
City/State/Zip:			
Contact:			
Contact Phone:			
Contact Email:			
No. of Employees: _	No. of Manager	rs:	No. of Front Line Personnel:
How many employed	es will be taking the course	?	
What percentage of	your workforce does this r	epresent?	
Please list the top 3	reasons for applying for the	e Victoria Frier	ndly Customer Service Program:
1.			
2.			
3.			
Best time of day for	training:		
Best day of the week	<:		
PRICING			
Member		Non-	Member
1-24 Employees			\$300 per year
25-99 Employees	\$150 per year		\$450 per year
100+ Employees	\$300 per year		\$825 per year

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