

Self Adhered and Fluid Applied Installer Course Registration Form

Dates: November 27-29, 2018 Location: Charlotte, NC Deadline for Registration is: November 12th, 2018 at 12:00 PM CDT

Description

- ABAA courses are open to everyone and are a great training opportunities for all. There is NO experience
 needed to attend one of our great training courses. Those who would benefit from training include
 manufacturers, sales reps, general contractors, architectural reps, and anyone in the construction industry.
- This course is designed to prepare experienced SAFL installers how to create an Air Barrier using Self Adhered and Fluid Applied materials. This course includes instruction on everything from selecting proper materials, substrate preparation, application technology, troubleshooting and hands-on training.
- For certification purposes <u>only</u>, a minimum of <u>3000</u> hours of work experience either directly with air barriers or in applicable related trade experience is required.
- It is an ABAA policy that each company employs one person trained in an ABAA Installer Training Course **and** one person trained in the Quality Assurance Program Administrator Course. This can be the same individual.

Important Information:

- ABAA reserves the right to cancel with a minimum 5 days' notice, based on lack of registrants
- Students who cancel their registration with less than 5 business days' notice will not receive a refund
- We advise all students to hold off on making any travel arrangements until the class has been confirmed as proceeding
- Attendees are responsible for travel and accommodation costs
- Class sizes are limited. Complete registration forms are processed in the order in which they are received.
- Missing information on submitted forms may result in not being able to attend the course.

Please Note:

704-556-1228

Recommended Airport:

Charlotte-Douglas International Airport (CLT)

- If you are looking to be certified, there is accompanying paperwork that must be completed and will be provided during training.
- It is one registration form per person.
- Payment must be received prior to the start of the course.

I have read and understood all of the information stated above.					
Name:	Date:				
Training Course Information					
Classroom Location: Carolinas Roofing & Sheet Metal Contractors (CRSMCA) 710 Imperial Court Charlotte, NC 28273	Hands On Location: SAME AS CLASSROOM				
Classroom Phone Number:	Hands On Location Phone Number:				

Please submit pages 1 and 2 of the registration form to the ABAA office by:

Emailing it to training@airbarrier.org or by toll free fax at **866.956.5819.**Air Barrier Association of America (ABAA) | 866.956.5888 | 1600 Boston-Providence Hwy. | Walpole, MA 02081

SAME AS CLASSROOM

Recommended Hotel:

Holiday Inn Express Hotel & Suites Charlotte – Arrowood Phone: 877-660-8550 to make your room reservation



session.

Date of Issue: 11/12/2015

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Mandatory: Please fill out the "Attendee and Compan	y" section I	below:				
Attendee First Name(s):		Attendee Last	Name(s):			
Attendee Email Address (for correspondence regarding	training info	ormation):				
Company Name:						
Company Street Address:						
Company Phone Number:	Company Email Address:					
Mandatory: Please fill out the "Fees" section below.						
Fees Description		Non Member	ABAA Member	Total		
Self Adhered and Fluid Applied Training Course (mandatory, if not already certified)			\$1495.00	\$995.00		
Self Adhered and Fluid Applied Exam (mandatory for certification)			\$200.00			
Installer Certification Fee (mandatory for certification)			\$250.00			
Quality Assurance Program Administrator Course (mandatory for company accreditation, if you currently do not have an ABAA QAP administrator)			\$195.00	\$95.00		
Quality Assurance Program Administrator Exam (mandatory for QAP administrator)			\$100.00			
Registration Late Fee (mandatory, if received after the "Deadline for Registration" date)		Additional \$150.00				
				Grand Total		
Mandatory: Please complete the "Payment" section be	lOW.					
☐ VISA ☐ Maste	erCard	Card American Express Check Sent				
Card Number:		Expiry Date:		CVV:		
Card Holder's Name (as it appears on the card): Authorized		Authorized Si	ignature:			
Please submit pages 1 and 2 Emailing it to <u>training@airbarrier.org</u> or by to	ll free fax a	at 866.956.5819.		by:		
DO NOT MAIL THE REGISTRATION FORM		1. <u>For Office Use Only:</u>				
			Total In	voice Amount:		
For registrants are seeking certification,			Total C	harge Amount:		
paperwork will be provided and can be submitted prior training; however, it is			Da	ate Processed:		
not required until after the training				Initials:		