

### **Field Auditor Registration Form**

Dates: February 27th- March 1st Location: Daytona Beach, FL

Deadline for Registration is: Monday, February 11th at 12:00 PM CDT

#### **Description**

The role of the Field Auditor is to perform quality assurance audits of air barrier assemblies on new commercial and institutional construction projects during installation. Inspect installation and review materials for compliance with specifications, ABAA requirements, and manufacturer requirements. Complete audit reports, document audits with photos, and address specific areas which have noted deficiencies and require corrective action(s).

#### **Requirements**

- Please follow the link below in order to review the auditor requirements and confirm whether this training is right for you: http://www.airbarrier.org/education/auditor-courses/
- Once you've reviewed these requirements, please send us your CV or résumé to <u>abaa@airbarrier.org</u> for review (please write "Attention Quality Assurance Department") in the subject line.

#### 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:

Date of Issue: 12/12/2018

- Be advised that ABAA cannot guarantee the amount of work an auditor will receive and, as such, we advise all potential candidates that they should view this work as a supplemental source of income.
- If you are attending for informational purposes only (i.e. not looking for certification), there is no need to send in your resume, or pay for the licensing fee.
- It is 1 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:

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

Emailing it to <u>training@airbarrier.org</u> or by toll free fax at 866.956.5819.

DO NOT MAIL THE REGISTRATION FORM.

Air Barrier Association of America (ABAA) | 866.956.5888 | 1600 Boston-Providence Hwy. | Walpole, MA 02081

# air barrier association of america

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Classroom Location:		ands On Location:					
Moisture Intrusion Solutions	Not App	pplicable					
475 Fentress Blvd- Suite A							
Daytona Beach, FL 32114							
Classroom Phone Number:		ds On Location Phone Number:					
1 386.682.3873		pplicable					
Recommended Airport:		commended Hotel:					
Daytona Beach International Airport (DAB)		newood Suites by Hilton Daytona Beach Speedway-Airport					
	Phone:	one: 1 386-258-2828 to make your room reservation					
Mandatory: Please fill out the "Attendee and Company" section	n below:						
Attendee Given Name(s):	Attende	Attendee Surname(s):					
Attendee Email Address (for correspondence regarding training information):							
Company Name:							
Company Street Address (include city, state, and zip code):							
Company Street Address (include city, state, and zip code).							
Company Phone Number:	Company Email Address:						
	, p. 3						
Mandatory: Please fill out the "Fees" section below.							
Fees Description	Fees Description		ABAA Member		Totals (\$)		
Field Auditor Training Course (mandatory if not already certified)		\$995.00	\$795.00				
Field Auditor Exam (mandatory for certification)			\$200.00				
Field Auditor Licensing Fee (mandatory to become licensed)			\$250.00				
Field Auditor Late Fee (mandatory if received after the "Deadline for Registrati	on" date)	date) Additional \$150					
. ,	Grand Total						
Mandatory: Please complete the "Payment" section below.							
☐ VISA ☐ MasterCard		American Express Check Sent					
Card Number:		Expiry Date: CVV:					
Card Holder's Name (as it appears on the card):		Authorized Signature:					
Please submit pages 1 and 2 of the registration form to the ABAA office by:			F	Office Head	h		
Emailing it to <u>training@airbarrier.org</u> or by toll free fax at 866.956.5819.			<u>For</u>	Office Use On	<u>ıy:</u>		
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