



AIR BARRIER ASSOCIATION OF AMERICA

Sprayed Polyurethane Foam Installer Training Registration Form

September 18-20, 2012 – East Windsor, NJ

Cut off for registration is September 4, 2012 - Please FAX completed form to: 866-956-5819

Location Information

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| <p><u>CLASSROOM & HANDS-ON SESSION – September 18-20, 2012:</u> Coastal Insulation Corp. 100 Lake Drive East Windsor, NJ 08520 (800) 535-0028</p> <p><i>*Attendees are responsible for travel and hotel costs</i></p> | <p>Recommended Airport: - Newark International Airport *(45 min drive to training site/hotel)</p> <p>Recommended Hotel (please reference group code EG2 as well as course dates to receive discounted rate) Holiday Inn 399 Monmouth St. East Windsor, NJ 08520 (609) 448-7000 *(5 min. drive from training site)</p> |
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| Training Package | Code | Member Price | Non-Member Price |
|---|------|--------------|------------------|
| Sprayed Polyurethane Foam Installer Certification Challenge Program September 18-20, 2012 Duration: 2.5 days (Day 1 & 2: 8:00am to 4:30pm Day 3: 8:00am - 1:00pm) | A | \$995.00 | \$1495.00 |
| Quality Assurance Program Administrator Course Date: Tuesday, September 18, 2012 Duration: 3 hours 5:00 pm to 8:00 pm | B | \$195.00 | \$295.00 |

Please note that this course is designed to teach experienced SPF installers how to create an Air Barrier using Spray Polyurethane Foam. For certification purposes, a minimum of 3000 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 requires one person trained in the Sprayed Polyurethane Foam Installer Training course **and** one person trained in the Quality Assurance Program Administrator Course. This can be the same individual.*

Company Name: _____

Company Address: _____

Company Phone/Main Contact's Email: _____ / _____

| # | Name | Code A and/or B | Registration Fee |
|--|------|-----------------|----------------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| PLEASE CONFIRM YOUR REGISTRATION BY <u>September 4, 2012</u> BY RETURNING THIS FORM <u>VIA FAX 1-866-956-5819</u> | | | TOTAL PAYMENT |

****Payment must be received by the ABAA office prior to the course start date**

- My check for total payment, made out to Air Barrier Association of America (ABAA) is enclosed.
- I would like to charge my registration fees to my **VISA** or **MASTERCARD**

VISA or MASTERCARD number

expiry date

Cardholder's name (exactly as shown on card)

ABAA reserves the right to cancel with a minimum 7 days notice, based on lack of registration. We recommend that travel arrangements be made once training is confirmed as proceeding. Students who cancel their registration with less than 5 days notice will not receive a refund.