

Self Adhered and Fluid Applied Installer Course Registration Form

Dates: August 28-30, 2018 **Location:** Hayward, CA

Deadline for Registration is: Monday, August 13th 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 only, 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 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:

- 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:
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Training Course Information

Classroom Location: Soprema 25545 Whitesell Street Hayward, CA 94545	Hands On Location: Same as Classroom
Classroom Phone Number: (800) 356-3521	Hands On Location Phone Number: Same as Classroom
Recommended Airport: San Francisco International Airport - SFO	Recommended Hotel: Fairfield Inn & Suites Oakland Hayward 25921 Industrial Blvd Hayward, CA 94545

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

Email to training@airbarrier.org 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

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Mandatory: Please fill out the “Attendee and Company” section below:

Attendee First Name(s):	Attendee Last Name(s):
Attendee Email Address (for correspondence regarding training information):	
Company Name:	
Company Street Address:	
Company Contact Phone Number:	Company Contact Email Address (for sending exam results):

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 note: registrations subject to be rejected after this date)	Additional \$150.00		
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:	

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For Office Use Only:
Total Invoice Amount: _____
Total Charge Amount: _____
Date Processed: _____
Initials: _____