

## Sprayed Polyurethane Foam Online Installer Course Registration Form

Applicant Name:

Date:

### Course 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 for the experienced SPF installer to learn how to install SPF as a complete air barrier system in commercial buildings. This course includes instruction on everything from selecting proper materials, substrate preparation, application technology and troubleshooting.
- For certification purposes, a minimum of 3000 hours of work experience either directly with air barriers or in applicable related trade experience is required, with 1500 of those hours being directly relate to SPF.
- 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:

- Students who cancel their registration with less than 5 business days' notice will not receive a refund.
- All students will receive a physical manual, however possession of manual is not required to participate in training modules but is highly recommended to use when writing the exam.
- Those seeking certification will be required to write an online proctored exam where they will require a webcam and microphone.
- An ABAA instructor will be available for a Q & A period following training. This will be determined on a "course to course basis".

### 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.

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

Emailing it to [training@airbarrier.org](mailto:training@airbarrier.org) or by toll free fax at **866.956.5819**.

DO NOT MAIL THE REGISTRATION FORM

## ABAA SPF Installer Online Course Registration Form

<b>Course Date:</b> <div style="text-align: center; color: red; font-weight: bold;">November 16-18, 2020</div>	<b>Deadline for Registration:</b> <div style="text-align: center; color: red; font-weight: bold;">Friday November 6, 2020</div>
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Mandatory: Please complete the “**Applicant and Company**” section below:

<b>Applicant Email Address-User specific:</b> <small>(for correspondence regarding training information and taking online exam)</small>	
<b>Company Name:</b>	
<b>Company Address:</b> <small>(include city, state, and zip code)</small>	
<b>Company Contact Phone Number:</b>	<b>Company Contact Email Address:</b> <small>(for sending exam results)</small>
<b>Mailing address to ship manual:</b> <small>(if different than above address)</small>	

Mandatory: Please complete the “**Fees**” section below.

Fees Description	Non Member	ABAA Member	Total
Sprayed Polyurethane Foam Online Course ( <span style="color: red; font-weight: bold;">mandatory</span> , if not already certified)	\$1095	\$595	
Sprayed Polyurethane Foam Exam ( <span style="color: red; font-weight: bold;">mandatory</span> for certification)		\$200	
Installer Certification Fee ( <span style="color: red; font-weight: bold;">mandatory</span> for certification)		\$250	
Late Fee ( <span style="color: red; font-weight: bold;">mandatory</span> if received after the “Deadline for Registration” date)		Additional \$150	
<b>** Note:</b> Once form is submitted your training manual will be ordered. If training is cancelled there is no reimbursement of fees for training manual.			Grand Total

Mandatory: Please complete the “**Payment**” section below.

VISA      
 MasterCard      
 American Express      
 Check Sent

<b>Card Number:</b>	<b>Expiry Date:</b>	<b>CVV:</b>
<b>Card Holder’s Name:</b> <small>(as it appears on the card)</small>	<b>Authorized Signature:</b>	

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<b>For Office Use Only:</b>
Total Invoice Amount: _____
Total Charge Amount: _____
Date Processed: _____
Initials: _____