



IMSA NOVEMBER 2009 CERTIFICATION PROGRAM

REGISTRATION FORM

First come, first served



(PLEASE COPY AS NEEDED AND FILL OUT COMPLETELY)

NAME: _____ EMAIL: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

EMPLOYER: _____ PHONE #: _____ FAX: _____

(Fax required for confirmation)

ARE YOU A PAID UP MEMBER? ___ YES ___ NO

(If you are not, you must pay the non-member fee for the first course that session. Memberships are good for one year)

The following classes will be given at : GLENDALE TRANSPORTATION BUILDING 6210 WEST MYRTLE, SUITE 121, GLENDALE AZ. CLASSES ARE 7 am to 3:30 pm.

COURSE NAME	DATE	MEMBER	NON-MEMBER	FEE
Fiber Optics for Traffic Signals Level I	11/2 to 11/3/2009	\$545.00	\$605.00	
Fiber Optics for Traffic Signals Level II	11/4 to 11/5/2009	\$695.00	\$755.00	
			TOTAL	\$

(IN ORDER TO QUALIFY FOR A FREE RETEST, YOU MUST BRING YOUR LETTER OF CERTIFICATION RESULTS MAILED TO YOU BY THE INTERNATIONAL OFFICE AND TAKE THE RETEST WITHIN 1 YEAR OF FAILURE DATE. IF YOU DO NOT HAVE THIS LETTER, YOU MUST PAY THE FEE FOR THE CHALLENGE EXAM.)

SUPERVISOR'S AUTHORIZATION: _____ (REGISTRATION WILL NOT BE ACCEPTED WITHOUT IT)

IF YOUR AGENCY NEEDS TO BE INVOICED, PLEASE COMPLETE THE FOLLOWING:

AGENCY: _____ PO# _____

(ADOT EMPLOYEES MUST SUBMIT PO NUMBER FOR PROCESSING)

CONTACT NAME: _____ PHONE: _____

BILLING ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

*** IMPORTANT: YOU MUST FAX THIS FORM TO PAT MCGREEVY @ 623-386-9418 OR EMAIL TO patmcgreevy@msn.com *** A copy must also be sent to Arizona Section IMSA. See address below.

Mail a copy of your registration with your payment to:

ARIZONA SECTION IMSA
P.O. BOX 4955
MESA, AZ 85211-4955

Make checks payable to: ARIZONA SECTION IMSA

Questions call Pat at 623-687-8060.

REGISTRATION: Starts 7/31/09 Extended until 10/16/09 4pm.

APPLICATIONS WILL NOT BE ACCEPTED BEFORE OR AFTER THIS DATE.

NOTICE: ALL NO-SHOWS WILL BE CHARGED A \$50.00 PROCESSING FEE.

PICTURE IDENTIFICATION IS REQUIRED