

Philadelphia Chapter ASHRAE

American Society Of Heating, Refrigerating and Air-Conditioning Engineers, Inc.

Continuing Education Application

I am applying for: Basic HVAC Course

Personal Information

Name: _____
Last First M.I.

Home Address: _____
Street City State Zip

Phone No.: _____ Date of Birth: _____ Application Date: _____

Email: _____

Current Employment

Employer: _____ From: _____ To: _____ Total _____
Firm Name Date Date Years

Business Address: _____
Street City State Zip

Job Title: _____ Phone: _____ Fax: _____

Email: _____

Discipline: Engineer CAD/Designer CAD/Drafting Sales Rep Trades Administration

Employment History

Firm	Location	Job Title	No. Years
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total years in the HVAC industry: _____

Education

School (Name & Location)	Years Attended	Major	Degree Or Diploma
High School _____	_____	_____	_____
College _____	_____	_____	_____
Other _____	_____	_____	_____

PLEASE SEE REVERSE SIDE FOR PAYMENT

PAYMENT

AMOUNT:

Basic Course _____ \$200 Deposit _____ \$800 Balance Due _____ \$1000 Fee

PAYMENT BY CHECK: _____ (made payable to "Philadelphia Chapter ASHRAE")

PAYMENT BY CREDIT CARD: _____ VISA _____ Master Card

Please note: Payment by credit card requires an additional 5% processing fee unless the full fee is being paid prior to the beginning of course.

Total Amount to be Billed to Card: _____

Credit Card Number: _____

Expiration Date: _____

Name on Card (please print): _____

Billing Address for Card: _____

RETURN THIS FORM WITH PAYMENT TO:

Larry Snyder
1147 N. 4th St., 4E
Philadelphia, PA 19123
Phone: (215) 925-1925
Email: 263bhf@verizon.net

For Official Use Only

Date Received: _____ Tuition: _____ Deposit: _____ Check No.: _____ Balance _____