



Radiation Safety Associates, Inc.

2019 COURSE REGISTRATION FORM

Thank you for your interest in the training courses we offer. Please complete the form below and submit it to us to register for your course. Registrations submitted without requested information will be returned for the missing information. Please Mail, Email or FAX this form to:

Radiation Safety Associates, Inc.
19 Pendleton Drive, PO Box 107, Hebron, CT 06248
VOICE: 860-228-0487 • FAX: 860-228-4402 • EMAIL: info@radpro.com

Please provide the information below:

NAME _____

TITLE _____

COMPANY INFO:

COMPANY NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PERSONAL INFO:

ADDRESS _____

CITY _____ STATE _____ ZIP _____

CONTACT INFO: *(In case we need to reach you about your registration, course cancellations, etc.)*

WORK PHONE _____

HOME PHONE _____

CELL PHONE _____

FAX _____

E-MAIL ADDRESS _____

WHICH COURSE(S) AND DATES DO YOU WISH TO ATTEND?

Radiation Safety Officer (Fee: \$1,495)

- March 4-8, 2019
- April 8-12, 2019
- October 28-November 1, 2019

Respiratory Protection at Nuclear Facilities
(Fee: \$995)

- March 18-20, 2019
- September 23-25, 2019

Health Physics Technician Level I, Basic
(Fee: \$1,495)

- May 6-10 2019

DOT Radioactive Shipper (Fee: \$495)

- March 25, 2019
- May 20, 2019
- September 30, 2019

Health Physics Technician Level II, Advanced
(Fee: \$1,495)

- October 14-18, 2019

HOW WILL YOU PAY FOR YOUR REGISTRATION(S)?

- CHECK ENCLOSED
- CHECK WILL BE MAILED
- CHECK WILL BE BROUGHT TO CLASS WITH ATTENDEE
- BILL AGAINST A PURCHASE ORDER, PO NUMBER _____

IF A SEPARATE BILLING ADDRESS, PROVIDE THE BILLING ADDRESS HERE:

ADDRESS _____

CITY _____ STATE _____ ZIP _____

- CHARGE TO MY CREDIT CARD (*CIRCLE ONE*)
 - VISA
 - MASTERCARD
 - AMERICAN EXPRESS
 - DISCOVER

ACCOUNT NUMBER _____

EXPIRATION DATE _____ SECURITY CODE _____

NAME OF CHARGE CARD HOLDER _____

BILLING ADDRESS OF CHARGE CARD HOLDER:

ADDRESS _____

CITY _____ STATE _____ ZIP _____

SIGNATURE (IF FAXING/MAILING FORM) _____

TOTAL AMOUNT AUTHORIZED FOR CHARGE \$ _____

CT sales tax applicable unless CT sales tax or Federal sales tax exempt. If so, CT sales tax exemption certificate and number must be submitted with PO or upon placement of order

Thank you for registering for training! You will receive a confirmation of this registration along with maps and driving directions at least one month in advance of your course. If you do not receive this information, please contact us (phone, fax or e-mail).



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