We are applying for employee(s) from the following company to attend the NAFCA Fence Training school in Sebring, Florida on February 8, 9, 10, 2016. Please be advised that the school has a limited amount of spots available and applications are accepted on a paid, first-come, first served basis. PLEASE PRINT CLEARLY OR TYPE:

Company Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: ( )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Fax Number: ( )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please check the appropriate registration fee (per person rate):

NAFCA Member……………………..$745 Non-Member………………………$945

The cost of registration includes: hotel accommodations (double occupancy), Breakfasts and lunches and Graduation Dinner, and course instruction. Hotel accommodations start on Sunday February 7th and end February 11th at noon, 2016.

The following person will attend (please print or type and provide **all** information):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Age Nickname Name Age Nickname

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position in Co. Yrs. of Fencing Experience Position in Co. Yrs. of Fencing Experience

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency name and phone number Emergency name and phone number

Birthdate:­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_ Male Female Birthdate:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Male Female

Smoking Room? Yes No Smoking Room? Yes No

Highest Education Level Achieved \_\_\_\_\_\_\_\_\_\_\_\_ Highest Education level Achieved\_\_\_\_\_\_\_\_\_\_\_\_

**PAYMENT OPTIONS**

Check (payable to NAFCA) Total Amount (U.S. Funds) $\_\_\_\_\_\_\_\_\_\_

*\*\* Please mail check ($1.20 Postage) along with* ***signed*** *application to NAFCA address listed below\*\**

**Remember seats are not reserved until payment has been received.  NAFCA FTS Chairman will provide a confirmation email upon receipt of payment.**

I understand the school is limited to Twenty-Eight (28) registrants, and space in the school is granted on a paid, first-come, first-served basis. Travel plans to attend should not be made until confirmation email has been received from NAFCA FTS Chairman. The aforementioned participant(s) will bring: Work boots, rain gear, gloves, safety glasses, pliers, tape measure, small level, hearing protection, and company sign, I can expect detailed instructions from NAFCA upon arrival of registration. Refund of fees, less $100 administrative fee, will be made only if vacated space in c lass is filled. All participants are physically fit and have no medical problems. We hereby release and hold harmless NAFCA and all its agents from any and all liability in connection with our employee’s participation in this school. We warrant that our employee(s) are properly covered by our own workers compensation insurance. I understand that any type of employee solicitation is strictly prohibited, will not be tolerated, is cause for immediate dismissal from the school without any refund or other recourse, and can be full cause and justification for consideration of expulsion from membership in the North American Fence Contractors Association

Contacts Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Today’s Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_