

CTS INSTRUCTOR TRAINING & CERTIFICATION PROGRAM REGISTRATION FORM — LOUISVILLE



I. WAYS TO REGISTER

MAIL

Tire Industry Association
1532 Pointer Ridge Place, Suite G
Bowie, MD 20716-1883

PHONE

301.430.7280
800.876.8372

FAX

301.430.7283

EMAIL

choogenboom@tireindustry.org

WEBSITE

www.tireindustry.org
Click on Training

II. ATTENDEE INFORMATION

Name _____ Nickname _____

Company _____ Yrs. Experience _____

Address _____

City _____ State _____ Zip+4 _____

Country (if other than U.S.) _____

Phone _____ Fax _____

E-mail _____

TIA provides lunch each day. Please note any special dietary considerations: _____

III. CLASS TUITION & SCHEDULE INSTRUCTOR SERIES

Classes begin at 1:00 p.m. EST on the first day. However, if you have less than 2 years of experience servicing truck tires, you can sign up for the early session on Tuesday. From 8:00 a.m.–Noon you will physically mount and demount a tire, as well as install and remove a wheel assembly from the truck using impact and torque wrenches. There is no additional charge for this session.

Tuition: **\$950**

- Oct. 12-15, 2021**
- I would like to attend the early morning hands-on session for Tuesday (8:00 a.m. to Noon)

Within two weeks of registering, you will receive a faxed confirmation from TIA, along with a map of the area.

V. METHOD OF PAYMENT

- Check (Make payable to TIA) Invoice me. My company's PO authorization number for this transaction is _____
- VISA MasterCard AMEX

Credit Card Number _____ Expiration Date ____/____/____ CW _____

Card Holder Name _____ (Please print) Card Holder Signature _____
 Checking this box represents my electronic signature

Cardholder Billing Address _____ (If different from above) City/State/Zip _____

TIA USE ONLY

INVOICE # _____

CONF # _____