CTS INSTRUCTOR TRAINING & CERTIFICATION PROGRAM REGISTRATION FORM — LOUISVILLE

TIA TIRE INDUSTRY ASSOCIATION
TIRE SAFETY STARTS HERE.

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. 11-14, 2022**

☐ 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 _____/_____/_____ CVV _____

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

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

TIA USE ONLY INVOICE # _____ CONF # _____