BUILDING INSPECTOR'S CAREER INSTITUTE

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REGISTRATION FORM

(Please mail or fax to the above)

Name _____
(as you want it printed on certificates)

Address _____

City _____ **State** _____ **Zip** _____

E-Mail _____

Home Phone_____ **Cell Phone** _____

Social Security #_____ **Birth Date** _____

Total Amount Enclosed $_____ **Cash** _____ **Check #** _____

Master Card ? **Visa ?** **State** _____

Credit Card Acct. No _____

Last 3 digits on the back_____ **Exp. Date** _____

Name on Card_____ **Signature** _____

Credit Card Auth #_____

Winter 2009

FT 10	Communication & Professional Practice	January 11, 13
FT 1	Roofing	January 18, 20
FT 4	Heating I	January 25, 27
FT 5	Heating II	February 2, 3 (Monday & Tuesday)
FT 2	Structure	February 8, 10
FT 6	Air Conditioning & Heat Pumps	February 15, 17
FT 9	Insulation & Interior	February 22, 24
FT 3	Electrical	March 1, 3
FT 7	Plumbing	March 8, 10
FT 8	Exterior	March 15, 17

Final Grade _____

Last Class _____