

OSHA 10 Registration Form  
Sign up NOW!

When: June 15<sup>th</sup> or 16<sup>th</sup> & 17<sup>th</sup>  
Where: 7605 W Carol Ave, Peoria, AZ 85345  
Cost: \$65 per person

To register, please fax name(s) and credit card information to:

Arizona Masonry Contractors Association • 602.274.5121

or

Register online at: <http://www.azmasonry.net>

Questions? Call 602.262.0510

**Class Attendance Options**

**Option 1:** The first half of the class is on **Thursday 6/15/2017** from noon to 5 pm and the second half of the class begins at 6 am on **Saturday 6/17/2017**.

**Option 2:** The first half of the class is on **Friday 6/16/2017** from noon to 5 pm and the second half of the class begins at 6 am on **Saturday 6/17/2017**.

**(Please check a class option)**

Name: _____	<input type="checkbox"/> Option 1	<input type="checkbox"/> Option 2
Name: _____	<input type="checkbox"/> Option 1	<input type="checkbox"/> Option 2
Name: _____	<input type="checkbox"/> Option 1	<input type="checkbox"/> Option 2
Name: _____	<input type="checkbox"/> Option 1	<input type="checkbox"/> Option 2
Name: _____	<input type="checkbox"/> Option 1	<input type="checkbox"/> Option 2
Name: _____	<input type="checkbox"/> Option 1	<input type="checkbox"/> Option 2
Name: _____	<input type="checkbox"/> Option 1	<input type="checkbox"/> Option 2

**CREDIT CARD PAYMENT INFORMATION**

Cardholder Name: \_\_\_\_\_  
Cardholder Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Email address: \_\_\_\_\_  
Credit Card #: \_\_\_\_\_  
Expiration Date: \_\_\_\_\_ CCV # (3 digits on back of card): \_\_\_\_\_