



**CONSTRUCTION TRAINING CENTERS OF NEW YORK STATE
BUFFALO REGION HEALTH & SAFETY TRAINING
FALL 2007 REGISTRATION FORM**



REGISTER ONLINE @ WWW.ABCNYS.ORG/EDUCATION

CE671S

Please check (✓) one or more of the following boxes (☐)

Sexual Harassment Prevention (3 hours)
 ABC Member \$65 per student
 Non Member \$95 per student
 Class date: Wednesday, October 24
 Class time: 5 pm – 8 pm
 Location: 2495 Main St, Suite 413, Buffalo, NY
REGISTRATION DEADLINE: OCTOBER 19TH

Adult First Aid/CPR (6.5 hours)
 ABC Member \$90 per student
 Non Member \$135 per student
 Class dates: Monday & Wednesday, October 3 & 8
 Class time: 5 pm – 8:30 pm
 Location: Buffalo Red Cross, 786 Delaware Ave, Buffalo, NY
REGISTRATION DEADLINE: SEPTEMBER 26TH

Asbestos Awareness Training (4 hours)
 ABC Member \$85 per student
 Non Member \$130 per student
 Class date: Monday, October 15
 Class time: 5 pm – 9:00 pm
 Location: 2495 Main St, Suite 118, Buffalo, NY
REGISTRATION DEADLINE: OCTOBER 10TH

Labor Relations (3 hours)
 ABC Member \$65 per student
 Non Member \$95 per student
 Class date: Wednesday, October 18
 Class time: 5 pm – 8 pm
 Location: 2495 Main St, Suite 413, Buffalo, NY
REGISTRATION DEADLINE: OCTOBER 13TH

IMPORTANT NOTE:

**ALL OF THE ABOVE TRAINING IS REQUIRED
FOR ALL N.Y.S.D.O.L. REGISTERED
APPRENTICES.**

STUDENT INFORMATION: PLEASE PRINT

Name: _____
 Soc. Sec. # _____
 Address: _____

 City _____ State _____ Zip Code _____
 Home Phone: (____) _____

EMPLOYER INFORMATION: PLEASE PRINT

Company: _____
 Address: _____

 Employer Phone: (____) _____
 Employer Fax: (____) _____

Payment Policy

Registration forms with full payment must be received by the registration deadline. No refunds for no shows. \$25 late fee for any registration form received after deadline.

Payment Method

Enclosed \$ _____

Check (payable to CTC) Check # _____

Construction Training Trust – CTT PO attached

Credit Card

Name on Card: _____

Signature: _____ Date: _____

Exp. Date _____ Total charged: _____

CVV# (last 3#s on back of card):

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Circle one: Amex (15#s) VISA (16#s) Mastercard (16#s)

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Please return this form with payment to:

CTC NYS, 6369 Collamer Drive East Syracuse, New York 13057
 Phone: (888) 696-2237 Fax: (315) 671-1512