

WELDING TRAINING & CERTIFICATION[™] REGISTRATION FORM

STEP 1 – Complete Information

| COMPANY INFORMATION | | |
|---------------------|-----------------------------------|----------------|
| | | INTERNAL USE |
| | | Event Date |
| Business Name | | Event ID |
| | | Committee Code |
| Address | | |
| | | |
| City | State | Zip |
| | | |
| Contact Name | Gold Class Number (If Applicable) | Phone |
| | | GM-2016 |
| Contact E-mail | | Provider Code |

| EVENT REQUEST TYPE (CHOOSE ONE) | | | | | |
|------------------------------------|---------------------------------|--------------------------|--|--|--|
| Aluminum GMA (MIG) Welding (WCA03) | Steel GMA (MIG) Welding (WCS03) | Steel Sectioning (SPS05) | | | |

If you hold existing I-CAR[®] Gold Class[®] or Platinum[™] status, you qualify for the Gold Class & Platinum pricing below. Otherwise, please use standard pricing.

| STUDENTS ATTENDING (List only students from the location hosting the event.) | | PRICING | | | | | |
|--|----------|-----------------------|----------------|-----------------------|-------|--|--|
| Name | I-CAR ID | Gold Class & Platinum | | Standard | | | |
| | | First Student \$875 | | First Student \$1095 | | | |
| | | | \$480 | | \$600 | | |
| | | | \$480 \$480 | | \$600 | | |
| | | Each | | Each | \$600 | | |
| | | Additional Student | \$480 | Additional Student | \$600 | | |
| | | | \$480 | | \$600 | | |
| | | | \$480 | | \$600 | | |
| | | | \$480 | | \$600 | | |
| | | | | | | | |

TOTAL

• Prerequisite Requirements: Students who register for Steel Sectioning (SPS05) are required to hold a current Steel (GMA) MIG Welding (WCS03) Certification.

• Two for the Price of One: Taking SPS05 will automatically renew WCS03. When a technician passes SPS05, he/she automatically renews the WCS03 certification, as long as he/she has an unexpired WCS03 certification. An unexpired WCS03 certification means that the technician successfully completed WCS03 certification within the last 5 years.



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STEP 2 – Complete Equipment & Infrastructure Questionnaire

In preparation for your event, review the Facility Preparation Checklist found at: www.i-car.com > Welding Training & Certification > Register for a Course > Click the appropriate checklist under Step 1.

PLEASE NOTE: This worksheet will be used in conjunction with a pre-event interview conducted by an I-CAR® Welding Representative.

| PREPARATION QUESTIONS - REQUIREMENTS | | | | | | | | | |
|---|-----------------------|---------------------------|----------|--|--|--|--|--|--|
| Do you have a sturdy mounted vise? | ∃Yes □No | Do you have a work table? | □Yes □No | | | | | | |
| Do you have the following personal safety gear for each technician? | | | | | | | | | |
| Welding Helmet DYes No | Welding Gloves Days D | No Welding Jacket | □Yes □No | | | | | | |
| Safety Glasses Safety Glasses | Ear Plugs 🛛 Yes 🗖 | No Welding Respirator | □Yes □No | | | | | | |

| WELDING EQUIPMENT (I-CAR® limits 2 technicians per welding machine and recommends having 1 backup machine available.) | | | | | | | |
|---|--|----------|---|--|--|--|--|
| Make | Model | Amperage | Condition | | | | |
| | | | □ New (Never Used) □ Good □ Fair □ Poor | | | | |
| Make | Model | Amperage | Condition | | | | |
| | | | New (Never Used) Good Fair Poor | | | | |
| Make | Model | Amperage | Condition | | | | |
| | | | □ New (Never Used) □ Good □ Fair □ Poor | | | | |
| Make | Model | Amperage | Condition | | | | |
| | | | New (Never Used) Good Fair Poor | | | | |
| Do the machines have de | Do the machines have dedicated electrical circuits for operation in the stalls in which they will be used? | | | | | | |
| Are the electrical cables and welding cables for these machines in good condition? | | | | | | | |
| Do you have spare replacement parts (contact tips, liners, nozzles, shielding gas, welding wire, etc.) that may require replacement during the Certification test? | | | | | | | |
| Welding wire type: 🔲 Steel ER70S-6 (.024) 🗖 Aluminum ER5356 (.035) | | | | | | | |
| □ Aluminum ER5554 (1.2 mm) □ Other: | | | | | | | |
| | | | | | | | |
| Shielding gas type: Steel (75% Argon/25% CO2) Cluminum (Argon 100%) Cher: | | | | | | | |
| Will the test area require the welding machines to use an extension cord? Yes No | | | | | | | |
| Do you believe your welding equipment that will be used for I-CAR training and testing is capable of successfully completing the Welding Training & Certification? (Equipment servicing by an authorized | | | | | | | |
| dealer may be considered.) | | | | | | | |

If you need assistance completing this form call I-CARE[™] Customer Support at **888.589.3148**, Monday thru Friday from 7:00 A.M. to 6:00 P.M. CST, or email **welding@i-car.com.**



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STEP 3 – Request a Certificate of Insurance

REQUESTING A CERTIFICATE OF INSURANCE

Please complete the following steps to secure a Certificate of Insurance:

- 1. Contact your liability insurance agent.
- 2. Ask to add I-CAR® as insured (see below for example).
- 3. Request a copy of the certificate form.

| T | HIS CERTIFICATE IS ISSUED AS A | TTAN | ER C | DF I | E OF LIABIL | CONFERS | NO RIGHTS | UPON THE CERTIFICA | TE HOL | DER. THIS |
|------|--|---------------|-------|------------|--------------------------|------------------------|------------------------------|---|-------------------------------|--------------------------------------|
| B | CERTIFICATE DOES NOT AFFIRMATI BELOW. THIS CERTIFICATE OF INS REPRESENTATIVE OR PRODUCER, AN | URAN ID TH | ICE | DO | ES NOT CONSTITUTE A | CONTRACT | BETWEEN " | THE ISSUING INSURER | (S), AU | THORIZED |
| t | MPORTANT: If the certificate holder he terms and conditions of the policy, certificate holder in lieu of such endors | corta | in po | olici | es may require an endors | ement. A sta | e endorsed. itement on th | If SUBROGATION IS W his certificate does not c | AIVED, | subject to ghts to the |
| PRC | DDUCER | | | | CONT. NAME PHON | ACT | | FAX (A/C, No): | | |
| | Shop's Insurer | | | | E-MAI ADDR | e lo, Ext); ESS: | | | - | |
| | See | • C | all | 0 | uts Below | INS ERA: | URER(S) AFFOR | DING COVERAGE | | NAIC # |
| INSU | ABC Auto Body Center | | | | | ER B : | | | | - |
| | 2310 Wood Street | | | | INSUR | | | | | |
| | Norridge, IL 60846 | | | ۰. | INSUR | | | | | 1 |
| | | | | | MBER: | | - | REVISION NUMBER: | | <u> </u> |
| C | HIS IS TO CERTIFY THAT THE POLICIES NDICATED. NOTWITHSTANDING ANY RE CERTIFICATE MAY BE ISSUED OR MAY I EXCLUSIONS AND CONDITIONS OF SUCH | PERTA | IN. T | IT. THE | INSURANCE AFFORDED BY | THE POLICIE | OR OTHER | DOCUMENT WITH RESPE D HEREIN IS SUBJECT T | HE POLI CT TO V O ALL T | CY PERIOD WHICH THIS HE TERMS, |
| LTR | TYPE OF INSURANCE | NSR N | WVD | | POLICY NUMBER | | POLICY EXP (MM/DD/YYYY) | LIMIT | | AMPLE |
| A | X COMMERCIAL GENERAL LIABILITY | x | x | | | | 1 | EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) | 5 | 1,000,00 |
| | CLAIMS-MADE X OCCUR | | | | | | 1000 | MED EXP (Any one person) | s | 5,00 |
| | | | | | | | | PERSONAL & ADV INJURY | 5 | 1,000,00 |
| | GENL AGGREGATE LIMIT APPLIES PER | | | | | | | GENERAL AGGREGATE | 5 | 1,000,00 |
| | POLICY X PRO- | | | _ | 1.1.1 | | | Emp Ben. | s | 2,000,00 |
| | AUTOMOBILE LIABILITY | - | | 1 | | | | (Ea acodent) BODILY INJURY (Per person) | 5 | |
| | ALL OWNED AUTOS HIPED AUTOS | | | | | | | BODILY INJURY (Per accident) | 5 | |
| | HIRED AUTOS | | | 3 | | | | PROPERTY DAMAGE (Per accident) | 5 | |
| | X UMBRELLA LIAB X OCCUR | | - | | | | - | EACH OCCURRENCE | s | 2,000,00 |
| c | EXCESS LIAB CLAIMS-MADE | x | x | | | | 12.00 | AGGREGATE | 5 | 2,000,00 |
| | DED RETENTION S WORKERS COMPENSATION AND EMPLOYERS' LIABILITY | | - 1 | - | | | | WC STATU OTH- | 5 | |
| | ANY PROPRIETOR/PARTNER/EXECUTIVE | N/A | | | | 10-11 C | | EL EACH ACC DENT | 5 | 100 |
| | (Mandatory in NH) | | | | | | 1. 1. | E L DISEASE - EA EMPLOYEE | s | |
| | DESCRIPTION OF OPERATIONS below | - | | - | | | | EL DISEASE - POLICY LIMIT | 15 | |
| | | | | | | | | | | |
| The | CRUPHON OF OPERATIONS/LOCATIONS/VEHIC) Certificate Holder is Add erage is primary and non-c- iver of Subrogation applies | Itio | na1 | TT | sured for General/ | Evrope T.4 | ability | | | |
| CE | RTIFICATE HOLDER | _ | - | _ | INTER01 | CELLATION | C. L. L. | | 1.12 | |
| - | Inter-Industry Conference Auto Collision Repair 5125 Trillium Boulevard | e on | | - | SH THI AC | E EXPIRATIO | N DATE TH | ESCRIBED POLICIES BE C EREOF, NOTICE WILL CY PROVISIONS. | ANCELL BE DEL | ED BEFORE IVERED IN |
| | Hoffman Estates, IL 6019 | 2 | - | / | AUTH | DRIZED REPRESE | ENTATIVE | | | |
| | | | | | | | | | | |



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STEP 4 – Submit Registration

SUBMITTING YOUR REGISTRATION

The following documents must be submitted to complete the registration process:

- 1. Certificate of Insurance with I-CAR[®] co-named with business as additional insured (Step 3, obtained from insurance carrier).
- 2. This registration form.

Fax registration form and Certificate of Insurance with payment by credit card to: 888.590.5086 Or mail registration form, Certificate of Insurance, and payment to: I-CAR Training Support Center Attention: Payment Processing 5125 Trillium Blvd. Hoffman Estates, IL 60192

PAYMENT INFORMATION

| Pay by Credit Card MasterCard | /ISA 🔲 American Express 🔲 Di | iscover | | | | | |
|--|------------------------------|--------------------|--|--|--|--|--|
| Card Holder's Name (Please Print) | Card Holder's Phone Number | Pay by Check | | | | | |
| Credit Card Number | Security Code \$ | \$ Check Number | | | | | |
| Expiration Date | Amount | | | | | | |
| Card Holder's Signature | | Amount | | | | | |
| Payment will be processed upon receipt of the registration form. | | | | | | | |

(eCodes and Coupons cannot be applied towards Welding Training & Certification Events)

WELDING TRAINING & CERTIFICATION[™] EVENT POLICY

Equipment & Facility Conditions:

On the day of the event, if the results of the Welding Capability & Readiness Assessment deem the equipment or facility to be inadequate, then student training for that day will be canceled. All Student Fee(s) will be refunded and only the Welding Capability & Readiness Assessment fee will be charged. If required equipment and/or facility conditions are corrected, a new event may be requested and a new Welding Capability & Readiness Assessment and Student Registration Fee(s) will apply.

Facility Event Reschedule:

If an event reschedule is necessary, I-CAR must be notified at least 3 business days in advance or Welding Capability & Readiness Assessment will be forfeited and only Student Registration Fee(s) refunded. A new event will need to be requested and a new Welding Capability & Readiness Assessment and Student Registration Fee(s) will apply. If no students show up on the day of the event, all fees will be forfeited.

Student Reschedule and No Show:

For an event with 2 or more students, I-CAR must be notified at least 1 business day in advance if a student reschedule is necessary. If notification is not received or a student does not attend the event, then that Student's Registration Fee will be forfeited. A new event will need to be requested for students(s) and a new Welding Capability & Readiness Assessment will apply. If no students show up on the day of the event, all fees will be forfeited.

I-CAR Event Reschedule:

If I-CAR has to reschedule the event, I-CAR will make every attempt to contact you as soon as possible once a reschedule has been deemed necessary. If the shop is unable to reschedule, a refund of the Welding Capability & Readiness Assessment Fee and all Student Registration Fees will be provided.

By registering for and/or attending I-CAR training, you agree to the terms of our Welding Training & Certification Event and Privacy Policy. The Privacy Policy can be viewed in its entirety at www.i-car.com. If you need assistance completing this form call I-CARE[™] Customer Support at **888.589.3148**, Monday thru Friday from 7:00 A.M. to 6:00 P.M. CST, or email **welding@i-car.com**.