TO REGISTER



Email the completed registration form to: diane.harty@nora.com



Fax the completed registration form to: (603) 894-0637



Mail the completed registration form to:

NTA Registration nora systems, Inc. 9 Northeastern Blvd. Salem, NH 03079



Registration Information

Registration fee: The \$400 registration fee per attendee will be refunded upon completion of the training.

Cancellation: If a registered attendee cannot make the training, a substitute may be sent in their place.

A refund will not be given if you are unable to fill the space.

The nora[®] Technical Academy begins at 8:00 am on the first day of training.

Attendees should wear appropriate clothing. All hand tools will be supplied.



nora pro install[®] system 2014 REGISTRATION FORM

1 Name of Attendee (Please Print)

Name			Cell Phone #
Street Address			Email Address
City		State	Zip
Emergency Contact			Emergency Contact Phone #
Mark the number of years	experience in the following:		
epoxy membrar	ne		
leveling compo	und		
patching compo	ound		
Company Name Street Address			
City		State	Zip
City Telephone* *Telephone required in the case of a	any last minute changes.	State Fax	Zip
Telephone* *Telephone required in the case of a Training Date Please check the date of th Registration forms are due Note: All classes are sched	e training session you would two weeks prior to the scheo uled on a first come/first set	Fax Fax d like to atter duled class d rve basis. Ple	nd.
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Card Number

Expiration Date

Signature