



Competent Person for Trenching and Excavating and Confined Space Entry 2008 Registration Form

Location: AGC, Wilsonville **Time:** 8 AM-5 PM *(all scheduled training dates are held on Saturday)*

Scheduled Training Dates:

January 12 March 1 April 26 June 21 September 13 December 20

Location: Lane Community College, Eugene **Time:** 8 AM-5 PM *(all scheduled training dates are held on Saturday)*

Scheduled Training Dates:

February 2 May 24 October 11

Location: Klamath Community College **Time:** 8 AM-5 PM *(all scheduled training dates are held on Saturday)*

Scheduled Training Dates:

February 16 May 17 August 2

Employer Information: (please check) AGC Member Non AGC Member

Company: _____ Address: _____

City _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

Contact Person: _____

Attendee Information (Please print clearly)

Name: _____ Name: _____

Name: _____ Name: _____

Name: _____ Name: _____

Cost: AGC Members - \$175 Non-AGC Members - \$250

Payment Information: Check enclosed payable to AGC \$ _____

VISA or MasterCard Account #: _____ **Exp. date:** _____

Cardholder's Name: _____ Signature: _____

Inclement Weather – In the event of bad weather and unsafe road conditions the class may have to be cancelled and rescheduled. Please call 503-685-8304 the morning of the class and listen to the recording.

Cancellation Policy: You may cancel your registration up to 7 days before the event. Your registration fees will be refunded less a nominal enrollment charge of \$25.00. Cancellations made between 2-7 days prior to the event will not be refunded; HOWEVER you may 1) send a substitute, or 2) transfer your registration to another program of your choice within 12 months. **No shows or cancellations received less than 48 hours prior to the class** will not be refunded and will be required to re-register and pay for any additional classes.

Payment required no later than three days prior to class.

Please contact Judy Robinson at 503-682-3363 or judyr@agc-oregon.org with any questions.

MAIL or FAX REGISTRATION FORM TO:

9450 SW Commerce Circle, Suite 200 Wilsonville, OR 97070 ♦ Fax: 503-682-1696