



## Asphalt Paving 1 2010 Workshop/Exam Schedule REGISTRATION FORM - *Complete all numbered sections*

① Check the box(es) for the workshop and/or exam you wish to attend. Check **ONLY ONE** set of workshop/exam dates for **ONE** city. Use a separate registration form for each set of dates in each city. (Dates are subject to availability.)

ORLANDO	FORT LAUDERDALE/SNAPPER CREEK	OCALA	TAMPA
<input type="checkbox"/> January 5      Workshop/Exam <input type="checkbox"/> January 5      EXAM ONLY	<input type="checkbox"/> May 4      Workshop/Exam <input type="checkbox"/> May 4      EXAM ONLY	<input type="checkbox"/> February 19      Workshop/Exam <input type="checkbox"/> February 19      EXAM ONLY	<input type="checkbox"/> June 24      Workshop/Exam <input type="checkbox"/> June 24      EXAM ONLY
<input type="checkbox"/> April 7      Workshop/Exam <input type="checkbox"/> April 7      EXAM ONLY	<input type="checkbox"/> August 10      Workshop/Exam <input type="checkbox"/> August 10      EXAM ONLY		<input type="checkbox"/> December 16      Workshop/Exam <input type="checkbox"/> December 16      EXAM ONLY
<input type="checkbox"/> September 20      Workshop/Exam <input type="checkbox"/> September 20      EXAM ONLY			

**CANCELLATIONS AND/OR RESCHEDULES MUST BE COMPLETED SEVEN (7) BUSINESS DAYS PRIOR TO THE WORKSHOP OR EXAM. FEES ARE SUBJECT TO CHANGE WITHOUT NOTICE. FEES ARE NON-REFUNDABLE WITHIN SEVEN (7) BUSINESS DAYS OF THE WORKSHOP OR EXAM. DATES ARE SUBJECT TO AVAILABILITY.**

② You may register up to five people on each registration form, for the same set of workshop and/or exam dates.

Name	Driver's License #	CMEC Workshop & FDOT Exam	FDOT WRITTEN EXAM ONLY
		<input type="checkbox"/>	<input type="checkbox"/> Full Exam
		<input type="checkbox"/>	<input type="checkbox"/> Full Exam
		<input type="checkbox"/>	<input type="checkbox"/> Full Exam
		<input type="checkbox"/>	<input type="checkbox"/> Full Exam
		<input type="checkbox"/>	<input type="checkbox"/> Full Exam

③ Enter the quantity and sub-total for the workshops and/or exams. Don't forget to order self-study materials if you need them. (Fees are subject to change without notice. Fees are non-refundable within 7 days of the workshop or exam.)

Description	Qty	Each	Sub-total
CMEC Workshop & FDOT Exam (includes Technician Workbook)	_____	\$ 325.00	\$ _____ .00
FDOT Exam Only	_____	230.00	\$ _____ .00
Asphalt Paving 1 Technician Workbook (includes \$6 flat rate shipping)	_____	31.00	\$ _____ .00
<b>TOTAL</b>			<b>\$ _____ .00</b>

④ Enter your contact and shipping information. Be sure to enter a PHYSICAL shipping address.

**Company:** \_\_\_\_\_ **Name** (person submitting this form): \_\_\_\_\_  
**Billing Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **St:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Shipping Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **St:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ **FAX:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ **Email:** \_\_\_\_\_

⑤ Enter your payment information. If paying by check, be sure to attach the check to the registration form.

Pay by Check	Pay by Credit Card	Pay by Invoice
<b>Check No.:</b> _____ <b>Amount:</b> \$ _____ .____	<b>Credit Card No.:</b> _____ - _____ - _____ - _____ <b>Expiration Date:</b> ____ / ____ <b>CVV:</b> _____ <b>Name on Card:</b> _____ <b>Signature:</b> _____	<b>P. O. #:</b> _____ You must be approved for invoicing. Email <a href="mailto:accountsreceivable@cmecc.org">accountsreceivable@cmecc.org</a> , if you are unsure of approval status.

Mail this form with check payable to: CMEC, 850 Courtland St, B1, Orlando FL 32804 407-628-3682  
 If you are paying by credit card or invoice you may fax this form to 407-628-3283.

**Register ONLINE at [www.cmecc.org](http://www.cmecc.org)**