ASHRAE HVAC Design Training: Level I Registration Form

London, UK

| Please Enroll Me In: Nobember 2019 – London, I | JK | | | |
|--|-----------------|------------------|-------|------|
| HVAC Design: Level I – Essentials (25-27 November 2019 |) | | | |
| ☐ Non-Member: \$925 (\$759 by October 23, 2019) | , | | | |
| ☐ ASHRAE Member: \$825.00 (\$659 by October 23, 201 | 9) | | | |
| ☐ Groups of 2 or more: \$659.00 per person | | | | |
| Total: | | | | |
| Primary Registrant Contact Information (Please print of | clearly) | | | |
| Full Name | Company | | | |
| ASHRAE Member: ☐ Yes ☐ No | | | | |
| Name to Appear on Certificate | | | | |
| (Only complete if attending training) | | | | |
| Address | City | Country | _Code | |
| PhoneEmail | | | | |
| Credit CardCardholder's name | | | | |
| Cardiloider's Hame | Expiration date | | | |
| Additional Company Registrants (Please print clearly) | | | | |
| Name | | ASHRAE Member: [| □ Yes | □ No |
| Name to Appear on Certificate | Email_ | | | |
| Name | | ASHRAE Member: [| □ Yes | □No |
| Name to Appear on Certificate | Email_ | | | |
| Name | | ASHRAE Member: [| □ Yes | □ No |
| Name to Appear on Certificate | Email_ | | | |
| Name | | ASHRAE Member: [| ☐ Yes | ☐ No |
| Name to Appear on Certificate | Email_ | | | |
| Name | | ASHRAE Member: | □ Yes | □ No |
| Name to Appear on Certificate | Email_ | | | |
| Name | | ASHRAE Member: | □ Yes | □ No |
| Name to Appear on Certificate | Email | | | |

General Information

Fee Covers: Course admittance, course materials, publications, break refreshments, and lunches.

Transfer, Cancellation and Refund Policy: Registration fees will be refunded in full if cancellation is received by ASHRAE Learning Institute at least 30 days prior to the training date. Cancellations received 15-29 days prior to the training date are subject to a \$150 cancellation fee. Registrants who do not attend the training or who cancel less than 15 days prior to the training date are liable for the entire registration fee. A substitute registrant may be enrolled at any time by contacting Tewana Parris by phone +1 678-539-2121 or email edu@ashrae.org. Member/Non-Member rates will apply to the substitute registrant.

Payment Directions

The transaction(s) will be payable to ASHRAE at the address below.

Pay by check to:

ASHRAE, Inc. 1791 Tullie Circle, NE Atlanta, Georgia 30329-2305

Contact Information: Annmarie Wilhoit or Marie Ingram

Telephone Number: +1 678.539.1198 Email Address: awilhoit@ashrae.org

The banking information for an ACH or wire transfer is as follows:

SunTrust Bank Wire Transfer Department 25 Park Place Atlanta, Georgia 30303

Beneficiary: American Society of Heating, Refrigerating and Air-Conditioning Engineers, Inc.

Swift Number: SNTRUS3A Account Number: 0008800146147 Routing Number: 061000104

Please include your customer number, your name and Company name (if it applies) on the information sheet to your bank. This will allow us to identify and apply your payment to your account in a timely fashion.