



## SESSION 11 REGISTRATION FORM

### COMMONWEALTH OF MASS. REQUIRED CONTINUING EDUCATION FOR PLUMBERS/GAS FITTERS

Class schedule: check in 8:00–8:30, gas code 8:30–11:30, plumbing 12:30–3:30.

You may also register online, [phccma.org](http://phccma.org), or call CE HOTLINE, 781-843-3840. It's simple and quick!

■ Pre-registration is required ■ No on-site registration

*Please check one of the boxes below*

September 22<sup>nd</sup> Braintree ☐

September 29<sup>th</sup> New Bedford ☐

Name: \_\_\_\_\_  
*As listed on your plumbing license*

Home Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Journeyman License # \_\_\_\_\_ Plumber ☐ Gas Fitter ☐

Master License # \_\_\_\_\_ Plumber ☐ Gas Fitter ☐

Corporate License # \_\_\_\_\_ Plumber ☐ Gas Fitter ☐

*Check appropriate box below.*

#### Non-Member

☐ Full Program \$100.00

☐ Gas Fitter only \$50.00

#### PHCC of MA Member/Employee

☐ Full Program \$80.00

☐ Gas Fitter only \$40.00

☐ Contractor Member FREE

Member company: \_\_\_\_\_

*Company name must be provided and verified in order to receive PHCC of MA member price.*

*Confirmations will be sent to all registrants one week prior to class. If you fail to attend a class and would like to reschedule, contact our office and PHCC of MA will enroll you in the next available class for a rescheduling fee of \$20. No refunds will be issued. PHCC of MA reserves the right to cancel any class due to low enrollment or any other reason.*

Credit Card Type (Circle One)	American Express	Discover	Mastercard	Visa
Credit Card Number	_____			Expiration Date _____
Cardholder's Name	_____			Security Code _____
Signature	_____			

Please mail or fax with credit card number to PHCC of MA  
400 Washington St., Suite 401, Braintree, MA 02184 Fax: 781-843-1178 CE Hotline: 781-843-3840  
(Checks should be made payable to PHCC of MA)