



Florida Atlantic University

College of Architecture, Urban and Public Affairs
Florida Institute for Safety and Construction

Registration Form

Name _____ Address _____

City _____ State _____ Zip _____

Home Telephone _____ Work Phone _____ Other Phone _____

e-Mail address _____

Company Name _____

Company Address _____

Are you a member of the AmlAQ Council? Yes No

Course Number	Course Name	Start Date	Fee
S059100	Mold Remediation Supervisor	7/26/05	\$595.00
S062100	Registration Fee		\$100.00
Total Enclosed			



Check / Name on Check _____

Company P.O.#(FAX copy to 954-229-4163) _____

Bill to the attention of: _____

MC Visa Disc. AMX # _____

Name on Credit Card _____ Expiration Date _____

Make checks payable to
Florida Atlantic University

Mail completed form to
Florida Atlantic University
Florida Institute for Safety and Construction
1515 West Commercial Blvd.
Fort Lauderdale, FL 33309

Register by phone: 866-518-5780

Web site: www.fau.edu/fisc

For Office Use Only

Agent _____ Date _____

Source _____

Ticket # _____ Auth.# _____