

"The Medical Gas Professionals"

## REFRESHER COURSE APPLICATION

\$285/Attendee for Classroom Portion Only.

If the Installer needs to provide a Braze Coupon for renewal, add \$100.00.

We wish to use provision QB-322(a) of ASME Section IX Boiler and Pressure Vessel Code.

**Please Note:** Renewal of the "Performance Qualification" is required when a brazer or brazing operator has not used the specific brazing process for a period of 6 months or more; or there is a specific reason to question his ability to make brazes that meet the specification.

installer NAME	B:		
HOME ADDRESS _			
CITY, STATE, AND	ZIP		
LAST 6 OF SOC. SE	C.# <u>OR</u> CARD ID#		
HOME PHN	HOME PHNMOBILE PHN		
INSTALLER EMAII			
		are set forth by National ITC Corporation, BPS thout making a braze with this procedure."	
DATE OF MOST RE	ECENT BRAZEMENT (must be on or be	fore expiration date)	
Print name of Contractor or Authorized Representative.		Signature of Contractor or Authorized Representative.	
Title of Signer,	Name of Company	Email	
	al Amount Enclosed: \$(\$ Check □ Money Order □ Crec Payment (request link at <u>customer.service</u>	lit or Debit Card $\square$	
Credit Card #	Exp. Da	te:/	
Security# on back (3 c	or 4 digits)		
Credit Card "Billing A	Address" Zip Code		
Signature			

Authorization of payment on the above noted Credit/Debit Card