



## WELDER TRAINING AND TESTING INSTITUTE

1144 N. GRAHAM ST. · ALLENTOWN, PA 18109 · TEL 610-820-9551 · FAX 610-820-0271

## **NDT Inspection Seminar Registration Form**

**OBJECTIVE:** This program is designed to provide the minimum classroom hours required for a high school graduate (or equivalent) to meet Level I and/or Level II qualifications in the chosen method in accordance with ASNT SNT-TC-1A. The course will include both written and practical examinations.

Time: 8:00 am - 4:30 pm (Includes a 30 minute lunch break)

Location: 1144 N. Graham Street, Allentown, PA 18109 For directions, visit our webstie at www.wtti.edu

Registration must be received two weeks prior to the training. To register, fill out the form below and return with FULL PAYMENT by check (mail form to WTTI) or by credit card (email the form to: mary@wtti.com). Please make check payable to:

Welder Training & Testing Institute, and send to: 1144 N. Graham Street, Allentown, PA 18109 Cancellations: WTII reserves the right to cancel up until one week prior to the first day of the course. In the event that a course is cancelled by WTTI due to insufficient enrollment, we will issue a full refund.

If the Registrant wishes to cancel, a cancellation notice must be received no later than two weeks prior to the course for a full refund. 75% of the course fee will be refunded to Registrants who cancel beyond the deadline. Registrants who do not cancel and do not attend the course will not receive a refund.

Your Name:	Choose a Program Option:	
Title: Your e-mail:	□ PT	\$495
Company: Mailing Address:	□ МТ	\$675
City: State: Zip Code:	□ PT & MT	\$1025 (Save \$145)
Telephone: ()Fax: ()	☐ RT Level I	\$1025
Credit Card #: Exp. Date:/_ Amount: \$	☐ RT Level II	\$1025
3-Digit code on back of card or 4-Digit on front of AMEX:	☐ UT Level I	\$1025
Name on Card:	☐ UT Level II	\$1025
City: State: Zip Code: Cardholder Telephone: () Email:	Course Date:	
Signature: Date: The signature above verifies acceptance of billing/cancellation terms and allows the use of the provided credit card information for payment in the amount indicated for this seminar.	*Prices include t textbook.	he cost of the

For Administrative Use Only
Date Payment was Received:
Payment Type/Check No.:
Amount Received: