

**It is what you learn after you know it all that counts!**

**Look for Our Globe Logo**



**WWW.HAZWOPER.NET or WWW.CHICAGOSAFETYINSTITUTE.COM**

**HENDY COMPANY, SUPER SAFETY or Chicago Safety Institute™**

**THE LEADER THE REST WILL FOLLOW**

**CLIENTS CALL ANYTIME (773) 538-3333**



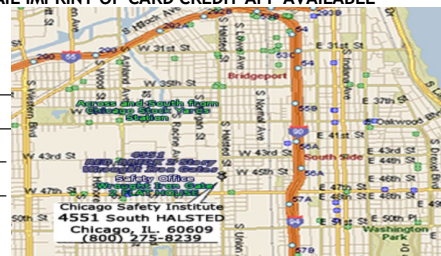
<b>TO :</b>	<b>PHONE # :</b>	<b>FAX :</b>
<b>COMPANY / NAME :</b>	<b>LOCATION HCSSCSI</b>	<b>Or location _____</b>

Part A (Authorized Representative Sign for Payment of Services [you agree to our Terms and Conditions for service in Part B & the credit card companies' terms and EMPLOYER AGENT [MUST SIGN HERE] / MASK REQUIRED X \_\_\_\_\_ Date \_\_\_\_\_ Credit Cards Terms and conditions Accepted] by signing this

Discounts must be reflected here. Call for pricing Total Cost US\$ \_\_\_\_\_ FAX OR MAIL IMPRINT OF CARD CREDIT APP AVAILABLE

**REGISTER: Check all that apply below! Use additional Sheet if Necessary.**

Qty.	Name of person attending use separate sheet if needed	Last Four of SSN	Agreed Cost	Ea
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____



We train on location by appointment in properly set up for COVID-19 prevention areas we approve; vaccinated instructors may socially distance and remove masks; others may drinking

<b>8 HOUR ANNUAL HAZWOPER Refresher</b> _____	<b>24-Hour HAZWOPER</b> _____	<b>40-Hour HAZWOPER</b> _____	<b>HAZWOPER Managers / 8 HR Site Supervisors</b> _____	<b>Excavation Safety</b> _____
<b>Respirators</b> _____	<b>Emergency Response Team</b> _____	<b>Fork Lift Training Onsite</b> _____	<b>Confined Space</b> _____	<b>Qualitative Fittest</b> _____
<b>AHA First Aid/Adult CPR</b> __ w/ <b>AED Add</b> __ <b>Benzene</b> _____	<b>RCRA Orientation</b> _____	<b>Quantitative Fit Test</b> _____	<b>Cost Plus Porting</b> _____	
<b>OSHA 10 Hour for Construction ID Required</b> _____ <b>Note OSHA DOL Cards Require 60 Days lead notice Less than 3 persons, reason.</b>	<b>OSHA 30 Hour for Construction ID Required</b> _____	<b>OSHA General Industry 10 Hour</b> _____ <b>or 30 Hour</b> _____	<b>GHS/Hazard Communication</b> _____	
<b>EM 385-1-1 30 Hour: Live Class \$595.00 Ea. or HAZWOPER SSO/Managers 48 Hour: Site Supervisor \$255.00 Live 40 Hour Class \$995.00</b>				
<b>DOT HAZMAT Initial</b> _____	<b>Cadmium Training</b> _____	<b>Awareness Circle Desired H2S Lead Asbestos</b> _____	<b>8 Hour Correspondence</b> _____	<b>Incident Command</b> _____
<b>MSHA Part 48 Refresher</b> _____	<b>New Miner MSHA 24 HR</b> _____	<b>Part 48 MSHA</b> _____ <b>24 Hours</b>	<b>40 Hour with Coronavirus Awareness or 1st Responder as Online Correspondence \$750</b>	<b>\$995 Live Seminar</b>

Check your desire course above! / MS PowerPoint® computer training HAZWOPER hands on, Video and/or lecture.

<b>From: Director of Training</b>	<b>Toll Free Call 800-275-8239</b>	<b>FAX this to 773-538-8080</b>
<b>TELEPHONE 773-538-3333</b>	<b>E-mail: hazwoper@ameritech.net</b>	<b>24 Hour &amp; International +1 (773) 538-3333</b>
<b>Billing Address: HCSSCSI Chicago Safety Institute 4551 S Halsted Chicago, Illinois 60609</b>		
<b>Location Chicago Safety Institute 4551 S Halsted St Chicago, IL60609: I-90/94 Local Lanes Exit @ Pershing Road go West to Halsted go South to Training located **4551 S. HALSTED 1<sup>ST</sup> Floor Gated Entry Brick** Located on East Side of Street, Trucks Park on South 46<sup>th</sup> Street off Halsted if your plates say "Truck" or park in legal spaces on 45<sup>th</sup>. Watch for signs om Halsted [No Trucks. OR SNOW NO PARKING] We are not responsible for any tickets of clients.</b>		
<b>We are OSHA authorized to issue "THE OSHA 10 Hour CARD" Nationally recognized for 25 Years</b>		
<b>1) AHA BLS Instructor</b>	<b>2) OSHA Outreach</b>	<b>3) Nationwide: National Safety Council Community Training Center</b>
<b>By arrangement always confirm start and scheduled times check Location of class is 4551 Halsted or others. Door open exactly at start times set for each session.</b>		

**Part B. Terms and conditions for Hendy Company, Super Safety or Chicago Safety Institute (HCSSCSI) service: A SIGNED AGREEMENT ON REGISTRATION FORM, Valid ID required for trainees.** Credit card or guarantee payment with register for training. Prepay at time of service unless credit application on file as established customer. All courses are booked in advance and tentative until invoiced and payment is received and trainees sign in, we reserve the right to reschedule. **Cancellation Policy: To Cancel FAX or EMAIL and Call** ten (10) business days before the class to be free, thereafter no refunds, call (800) 275-8239 and FAX (773) 538-8080. Thus [CANCELLATION less than < 10 DAYS WE CHARGE FULL PRICE/ your cancellation less than < 3 DAYS FOR MSHA and OSHA 10 or 30 Hour. For services, for online or correspondence at upon demand invoice or registration; no refund exceptions without our written approval (books and the original certifications must be recovered). [NO CANCELATIONS BETWEEN December 15 and January 1, WEEKENDS OR HOLIDAYS will be refunded] No other refunds in order to cover our cost, no show no refund, and online training or correspondence no refunds after 24 hours of registration. **We reserve the right to cancel.** If WE CANCEL there is a FULL REFUND for cancellation. Cancellations and rescheduling fees shall apply \$50.00 (Example with letter for dated after booking drug test failure & military activation excluded, Dr. Letter Medical Emergency, Court letter Jury Duty). We do not refund last minute project cancellations as we have time allocated and costs preparation. We can perform at approved facility on a cost plus 15% basis, \$20.00 per hour for air, hotel, travel hours more than 30 miles. Seats guaranteed upon payment and or if mutually provided by HCSSCSI and hosting client. This constitutes allowing us access to facility if not at our location. Pay by Corporate, or Certified Check, Money Order or Credit Card w/ processing fee. Late payments ANY course incur interest 15 % Per Month (or maximum allowable by law (No Exceptions) and VOID ALL DISCOUNTS and for HAZWOPER 40 Hour cost shall be full price \$995.00 Effective August 1, 2017. If you don't have an approved credit account here, then paying after 4 hours day of training is late registration \$995.00 Ea. for 40-Hour Courses and pay for 8 Hour Refresher \$145.00 and or Site Supervisors \$350 Ea. except correspondence course that is thirty days from the date of registration where applicable. Client agrees to pay promptly and within Sixty Days (60 Days) past due an interest fee of 15 % Per Mo. or the highest allowed by the (government or state) the lower of the two shall apply, will be charged thereafter, non-payment subject to costs for recovery. We reserve the right to Sub-Contract all or a portion of our services. Contract for payment on demand unless indicated otherwise. Other binding terms shall be on registration signed for payment these terms and those are binding and the latter shall supersede all others in the event of any conflicting terms. **[Client and all related persons being serviced by the authorized person signing agreeing to any of our services shall pay any attorney fees for us to recover our loss. Furthermore I agree to hold harmless, indemnify, and defend David Hendy; Hendy Company, Super Safety or Chicago Safety Institute, premises, or any others e.g. staff, instructors & our contractors, and the property owners for any accidents, personal injury, lost time, injuries, property damage and/or to be not liable for any circumstances.]** This is because we do not supervise your employees or give medical physicals, you agree the employer is responsible for all medical surveillance for attendees. Our responsibility for any harms is limited to extremely gross negligence. **We are not responsible for any unforeseeable travel delays we can not anticipate or delivery dates. No cell phone use during case must go outside or in halls. If at our location anyone may cancel for free if signed in on time and within first 2 hours only.** There is good dining locally if catering we charge for food in most cases; coffee water is free. If any part of this agreement shall be found not applicable it shall not restrict the other parts from being applicable all participants shall be covered by their own or employers' workers compensation, or their own insurance or employers and assume their own responsibility for any whatsoever accident or causation. That is solely the individual or employer's responsibility you agree your employees are physically fit to get this training 29 CFR 1910.120(f). [Warning actual work conditions may differ from training we DISCLAIM any written or spoken information, materials, materials that are property of the owner(s) and content may only be applicable at the time of training it is for educational purposes only and the user is responsible for any use of content or materials.] [We do not endorse any Manufactures products for any purpose]. Discounts may be available for groups. Physicals required and all students must be screened before class by answering CDCs Airline Interim Guide or Coronavirus symptoms questions before entry NO ONE SICK COUGHS, RUNNY NOSE SNEEZING, FEVER ABOVE 100, WILL BE ALLOWED IN TRAINING or present evidence of screening by employer's representative for safety. Temperature check may conducted anyone at or above 100 degrees will not be admitted, masks required, social distancing is expected masks required at all times. **[We reserve the right to not admit anyone or admit.] We disclaim any affiliation with the US Government and any copyrighted materials are property of their respected owners or trademarks, mention of these is for training purposes only. We follow our federal customers guidelines and wear masks in the premises.**

**\*\*\*\*Effective January 1, 2022 We request any attendees be fully vaccinated 17 days prior to attending training.\*\*\*\***  
Persons not vaccinated we prefer have separated classes for respecting those who have obtained such protection.

<b>Part C (Company Authorized Representative Sign for Payment &amp; Service Terms) [Must be signed in space at top. Email or FAX to 773-538-8080] Credit Card Information as follows fill in the blank: Masks are required, anyone with sick must leave,</b>			<b>LIST DATES DESIRED:</b>
<b>Company &amp; Billing Address:</b>		<b>City:</b>	<b>State:</b>
<b>Credit Card # :</b>	<b>Type:</b>	<b>Expiration Date :</b>	<b>Security CV2 Number Back of Card Last 3 # or Amex #</b>
<b>Address St. # :</b>	<b>City :</b>	<b>ST. :</b>	<b>Zip :</b>
<b>Print Name of Cardholder:</b>		<b>Additional Information:</b>	