

“MASTER PLUMBERS ASSOCIATION”
Of the City of Philadelphia
“Providing; Education, Training and Advocacy for the past... 132 Years”

“ MANDATED ! ”

By the City of Philadelphia
to keep your License and obtain permits
(Read the **IMPORTANT** Information on reverse side of this form)

“ OSHA 30 ”
CERTIFICATION COURSE

APRIL 11th, 18TH, 25TH & MAY 2ND (4 Saturdays)

This is a Bonafied OSHA course. Upon completion of 30 hours you will receive a Certification that will meet the City of Philadelphia Criteria and be able to renew your License, enable you to obtain permits without ever having **YOUR BUISNESS SHUT DOWN, LOSING MONEY!** The DEADLINE date: 9/30/15.

Held at: Johnny’s Italian Restaurant,
4200 Comly St. Phila., PA 19124
Classes Start at 7:00am Sharp to 3:30 pm

Free
Parking Available
Coffee & Lunch included

***SEATING is LIMITED** Cost \$450.00

“CALL TODAY ... to Register!” 215 - 331-6994 Fax 215-331-6987
“Classes, filling up fast” (or Pre-register for next available classes)

This is an educational program to make all type Contractors aware of Occupational Safety Hazards in the work place, to comply with OSHA Standards. I / we agree to hold harmless the Master Plumbers Association of the City of Philadelphia (MPAP) and or their Representatives responsible for me / my company / employees for their actions in the work place and or on any job sites. Cancellation Policy; registration cost is non refundable for any reason. I agree to pay for Services received and hereby further authorize the Master Plumbers’ Association of the City of Philadelphia /MPAP / PAPHCC to bill any of My credit card(s) for the services being provided and I agree to perform the obligations set forth in the applicable card holder agreement with the credit card issuer.

Sign here **X** _____ Date: _____

PRINT / OSHA 30 Applicant Name _____ Phone _____

Company Name _____ E-mail _____

PRINT / Card Holder Name (as appears on card) _____

Sale () C/Card# _____ Exp. Date _____ Security Code _____

Referred by: _____ Paid by: () Cash () Credit Card () M/O () Check / # _____

* Make Checks Payable to: **M P A P**
(* Note: ALL checks MUST be backed by a Credit Card)

Master Plumbers Assoc. Phila.
mail application 8133 Frankford Ave.
& check to: Phila., PA 19136