



PETROLEUM EQUIPMENT CONTRACTORS ASSOCIATION OF NEW JERSEY

P.O. BOX 1502, Sparta, NJ 07871 • Tel: (973) 729-2108 • Fax: (973) 729-5441 • www.peca.net

December 11, 2017

O.S.H.A. Training Registration

Dear Members:

Subsequent to the approval by the Board of Directors, this questionnaire is being distributed to all members in an effort to determine the number of participants interested in the upcoming annual OSHA Refresher Training Program.

This year's training will take place at **The Hanover Manor**, 16 Eagle Rock Avenue, East Hanover, NJ. Continental Breakfast, Lunch and refreshments will be provided for each attendee.

- The Date is Friday February 02, 2018.
- Registration begins @ 7:30 a.m.
- The course will be offered only on this date.

We need immediate feedback from the Membership in terms of who is interested in participating in the OSHA Training through P.E.C.A., and, if your company has interest in this, how many persons do you anticipate sending?

Cost for the OSHA Refresher course is as follows:

OSHA 8 hour Hazwoper Refresher Training

| | |
|-------------------------------|---------------------------|
| Up to membership limit | \$ 115.00 per Participant |
| In excess of membership limit | \$ 135.00 per Participant |
| Non-Members | \$ 180.00 per Participant |

AT THIS TIME WE ARE REQUESTING THAT EACH MEMBER COMPANY COMPLETE AND RETURN THE ATTACHED FORM AS SOON AS POSSIBLE. You may reply by email to samsaba@peca.net or fax to 973-729-5441. Please provide an email address with your reply.

Upon receipt of your positive response, a copy of last year's sign-in sheet will be sent to you for updating. **The updated sign-in sheets and payment will be required by January 15, 2018.**

PLEASE COMPLETE AND EMAIL OR FAX BACK THIS FORM
AS SOON AS POSSIBLE

To: PECA

Email: samsaba@peca.net or Fax: 973-729-5441

From: _____

Contact Person: _____

Contact Phone Number: _____

Contact email: _____

We are NOT interested in the OSHA Training this year (_____)

We ARE interested in the OSHA Training this year (_____)

Number of persons we are intending to send (_____)

(Seating will be limited to accommodate all member companies)

Company Name _____

Contact Person e-mail address: _____