

International Union of Operating Engineers LOCAL 399 CLASS REGISTRATION FORM

NON-MEMBER

Date: / / Referred by:				
Name:				
Social Security No.: XXX - XX	_ (last 4 digits only)	Date of Birt	h: / _	/
Home Address:				
City:	Sta	nte:	Zip:	
Home Phone: ()	Cell Phone:	()		
Personal EMail Address: By providing your email address, you authori address. ABSOLUTELY NO BUSINESS, BUIL			Jnion related infor	mation via your email
Have you taken classes here previously?	No			
How many classes are you available for?	1) Two (2)			
Availability: Time AM PM Days:	M T	W	TH	F SA
Employer:				
Place of Employment:				
I understand that filling out a registration form will NOT gu	arantee me placement i	n a class.		
I understand if placed in a class I will be notified by Local 3	399's Education Departr	nent.		
I understand if I do not show up on the first day of class (v	vithout prior notification	n), I forfeit my er	rollment in the	e registered class.
I understand that the International Union of Operating Engi	ineers, Local 399 ETF fo	llows the Triton	College Catalo	g.
I understand that payment is due on or before the 1st day	or class.			
x				
Non-Member Signature				

PLEASE FILL OUT REGISTRATION FORM COMPLETELY AND LEGIBLY
FAX REGISTRATION FORM TO THE LOCAL 399 EDUCATION DEPARTMENT: (312) 842-1590
Or, you may SCAN and EMAIL your registration form to: registrations@iuoe399.com
Any questions, please contact Local 399's Education Department: (312) 372-9870 Ext. 4000