BPI CANADA INSTALLER CERTIFICATION REGISTRATION FORM

Part A: Installer Information

1) Please list your information: *(please print)*

Installer Name:_____

Home Address: _____

City, Prov, PC:_____ Phone: (____)_____

Personal Email:_____

Company Name:_____

Company Address:_____ City, Prov, PC :_____

Company Phone:_____Company Fax:_____

Company Email:_____

3) Please check off certification desired: *(select all that you require)*

❏ Air Leakage Control ❏ Conventional Insulation ❏ Spray Polyurethane Foam

❏ Siding & Cladding ❏ Doors & Windows

5) Please review and sign the following:

I, *(print name)* _____, do solemnly declare; that to the best of my knowledge, the foregoing Information is true and correct. I hereby authorize BPI Canada to provide, on request, my status as a certified installer.

_____ _____

Signature Date

Part B: Program Costs

Detailed Costs	Fees	Quantity	HST/GST	Totals
One-Time Registration Per Certification	$250.00			
Written Examination (per exam)	$200.00			
			Total Amount Due	

❏ Cheque for total payment, made out to BPI Canada, is enclosed.

❏ VISA ❏ MasterCard

Credit Card Number: ___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___ Expiry Date: ___|___

CSC Code: _____

Cardholder's Name: _____ Authorized Signature: _____

Please forward this form along with payment to:
410-250 McDermot Ave, Winnipeg, MB R3B 0S5
Fax: (204) 956-5819 Email: admin@bpicanada.org