

# Los Angeles

## Spring 2018 BOMA Seminars

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The IUOE Local 501 Training Center will be offering BOMA seminars during the Spring of 2018. After completion of a seminar, members receive a Certificate of Completion. The hours of the certificate may be applied towards BOMA recertification for members that are currently BOMA certified. The seminars will be held at the Los Angeles Training Center, 2501 W. 3<sup>rd</sup> St, Los Angeles, CA 90057. For further information email JATC-LAInfo@local501.org or visit us at www.local501training.org.

### **BOMA SEMINARS (8 hours)**

- Mondays, 8:00 a.m. to 4:00 p.m.
- Cost: \$40.00 per Seminar

<b>Monday</b>	<b>April 9, 2018</b>	<b>Subject</b>	<b>Cost</b>
	BOMA Seminar	General Maintenance	\$40
<b>Monday</b>	<b>April 16, 2018</b>	<b>Subject</b>	<b>Cost</b>
	BOMA Seminar	Electric Motor Controls	\$40
<b>Monday</b>	<b>April 23, 2018</b>	<b>Subject</b>	<b>Cost</b>
	BOMA Seminar	HVAC	\$40
<b>Monday</b>	<b>April 30, 2018</b>	<b>Subject</b>	<b>Cost</b>
	BOMA Seminar	Plant Operations	\$40
<b>Monday</b>	<b>May 7, 2018</b>	<b>Subject</b>	<b>Cost</b>
	BOMA Seminar	Instrumentation & Controls	\$40

### **JATC Disclosures:**

1. The Operating Engineers Local 501 JATC reserves the right to cancel or reschedule a class.
2. The number of BOMA hours earned depends on the number of class hours attended

# Los Angeles Spring 2018 BOMA Seminars

**REGISTRATION INFORMATION:**

**To Register:**

Mail completed form including payment to:  
**Local 501 Training Center**  
**Attn: Spring 2018 BOMA-LA Seminar Registration**  
**2501 W. 3rd Street**  
**Los Angeles CA 90057**

**Payment Options:**

1. Check or Money Order payable to Local 501 JATC
2. Credit card: we accept VISA or Master Card

If paying by credit card, you may fax completed form to:

- 213.388.0696

You may also email completed form to:

- JATC-LAinfo@local501.org

**Incomplete registration forms and/or those that do not include payment will not be processed, and space will not be held.**

**Member Information (all information is required)**

First Name & Last Name		Job Classification	
Home Address		City, State, Zip	
Personal Email Address (Only )		Primary Phone Number	
Course Number and Name	Location	Dates	Fee
<b>TOTAL DUE:</b>			
<input type="checkbox"/> <b>Credit Card</b> complete below		<input type="checkbox"/> <b>Check #</b>	<input type="checkbox"/> <b>Money Order #</b>
Card Number	Expiration Date	Total Amount	
Name as it appears on card	Signature		

**REFUND INFORMATION:**

**JATC Refund Policy:**

Refunds are available for various reasons including, but not limited to, a cancellation by the member or the Center, and as follows:

1. Request a JATC Refund Request Form
2. Complete the Refund Request Form and submit to JATC
3. Payments made by check must clear before a Refund Request Form is processed.
4. Refunds will not be made after thirty (30) days from the original payment date.
5. A copy of the original receipt and form of payment must accompany the Refund Request Form.