

# **AAADM** *American Association of Automatic Door Manufacturers*

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## **AAADM INSPECTOR CERTIFICATION PROGRAM** **CREDIT CARD PAYMENT FORM**

[THIS FORM MUST BE RETURNED VIA FACSIMILE, E-MAIL, OR U.S. MAIL WITH COMPLETED APPLICATION AND LICENSE AGREEMENT FORMS. CREDIT CARD INFORMATION WILL NOT BE TAKEN OVER THE PHONE.]

[Prices subject to change.]

1. **\$210** per person registration fee [U.S. funds].
2. Additional charge if binder is to be shipped overnight:  
UPS Next Day     U.S. - \$65     Canada - \$95    [Other - Call AAADM]  
UPS 2<sup>nd</sup> Day     U.S. - \$35     Canada - \$85    [Other - Call AAADM]
3. We accept MasterCard, Visa, or American Express.

### **PLEASE TYPE OR PRINT LEGIBLY:**

**Registrant Name(s):** \_\_\_\_\_  
\_\_\_\_\_

**Class Date / Location:** \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_

***PLEASE NOTE: THE CREDIT CARD CHARGE WILL BE SHOWN ON YOUR STATEMENT AS: THOMAS ASSOCIATES, INC.***

**Type of Card:**     MasterCard     Visa     American Express

**Card Number:** \_\_\_\_\_

**3 or 4-Digit Security Code:** \_\_\_\_\_    **Expiration Date:** \_\_\_\_\_

**Name on Card:** \_\_\_\_\_

**Company [if applicable]:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_

**Signature of Cardholder** \_\_\_\_\_

**Print Name** \_\_\_\_\_

**COMPLETE THIS FORM IN ITS ENTIRETY AND RETURN IT TO THE AAADM OFFICE.**