Service Training Application

Please Type or Print Your Primary Contact Information Clearly			
Company Name:			
Street Address:			
City/State/Zip:			
Phone:	Fax:		
E-mail Address:			
How many years of experience in servicing HVAC ed	quipment? 0 - 5 6 - 10 Over 10		
What types of systems do you service most frequent	ly? Commercial Residential		
Have you ever serviced Desert Aire equipment in the past? Yes No			
Do you perform new equipment installations?	Yes No		
Do you provide new equipment sales?	Yes No		
Names and E-mail Addresses of Technicians Atte	ending: Please Print (Fill out a second form for additional		
names and e-mails.)			
1. Name:	_ NATE Certified: Yes□ No□ NATE ID #		
E-mail: (REQUIRED!)			
2. Name:	_ NATE Certified: Yes No NATE ID #		
E-mail: (REQUIRED!)			
3. Name:	_ NATE Certified: Yes□ No□ NATE ID #		
E-mail: (REQUIRED!)			
Do any techs attending have any special dietary requirements? If so, please advise.			
<u>Check the number of techs attending. For more than 3 techs – the total cost is \$500 for the first tech and \$250 for each tech after:</u>			
May 14-15, 2025	3 Techs Other Please specify the		
\$500 Total \$750 Tot	al \$1000 Total number of techs attending		
Oct. 15-16, 2025 1 Tech 2 Techs	3 Techs Other Please specify the		
\$500 Total \$750 Tot	al \$1000 Total number of techs attending		
	eation and is applied towards your total class fee. Your st day of class. Or, pay in full with this application.		
Combined Class:			
1 Technician: \$500 Deposit	due with this application: \$75 Balance: \$425		
2 Technicians: \$750 Deposit	due with this application: \$150 Balance: \$600		
3 Technicians: \$1000 Deposit	due with this application: \$225 Balance: \$775		



Please list the following for the Desert Aire Rep that recommended you:			
Company:			
Branch (if applicable):	Name of rep:		
	ent everal methods of payment for CST Training including check, credit card or P.O. it e account that's in good standing.	[:] you have	
Check payable to:	: Desert Aire		
Mail to:	Desert Aire N120 W18485 Freistadt Road Germantown, WI 53022		
Credit Card Instruction	<u>ions</u>		
Card Type: Visa	MasterCard AmEx Card number:		
Expiration date: (M	Mo. & Yr.) CVC Code:		
Signature as show	vn on card:		
Purchase Order Num	nber Instructions		
If you do not have	an account and would like to establish one with Desert Aire, call us at (262) 946-	7400.	
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Depart Aire Cartified Carving Technicians have a very class working relationship with Depart Aire Cales

You must submit this application at least 30 days prior to the start of training. A \$75 nonrefundable registration fee is required per student with this application. The balance is due in full 10 days prior to the start of training. We accept check and credit card. We will also accept a P.O. if you have an existing account with Desert Aire. All payment details are outlined on the **Method of Payment Form.**

Desert Aire also reserves the right to cancel any training session up to 30 days prior to the start of the first day of class. You will be notified of any cancellations and refunded the full cost of the class excluding any prepaid transportation and lodging expenses. Your nonrefundable registration fee will be applied to the next training class you attend.

It is our company's policy to work only with companies who are properly insured. Please provide Certificate of Insurance and maintain insurance for general liability with minimum limits of \$1,000,000 occurrence / \$2,000,000 aggregate, motor vehicle liability \$1,000,000 limit, and workers compensation, including employers liability. Desert Aire Corp. must be named as an ADDITIONAL INSURED on the Certificate of Insurance for general liability and auto liability.

WE WILL MAIL YOU A CONFIRMATION LETTER 30 DAYS PRIOR TO THE START OF THE TRAINING CLASS.



EMAIL THIS TWO PAGE FORM TO - service@desert-aire.com