



**NJGCA Training Class Registration Form!**  
**-ALL CLASSES WILL BE HELD AT NJGCA HEADQUARTERS-**  
**66 Morris Avenue, Springfield, NJ 07081 (Union County)**



**CLASS OPTIONS:**

**1. ENTIRE EMISSION REPAIR TECHNICIAN CERTIFICATION CLASS:** Everything needed to become a licensed Emission Repair Technician.

- New Jersey State Specific Information Course
- ETEP Sections 1-10 - THE ENTIRE ETEP CURRICULUM
- ELEVEN DAY CLASS - ONE DAY A WEEK FOR ELEVEN (11) WEEKS

CLASS COST (INCLUDING MANUALS):

- NJGCA Member rates: \$1,995.00
- NON-Member rates: \$2,195.00

CLASS SCHEDULE: Classes will be held on eleven (11) consecutive Wednesdays, in May, June and July.

**8:00am to 4:00pm each Wednesday from Wednesday, May 13 to Wednesday, July 22**

**2. RE-CERT CLASS EMISSION REPAIR TECHNICIAN:** The NJDEP approved Re-Certification Class for Emission Repair Technicians.

**ETEP \*\*NEW\*\* Sections**

Section 8 - Advanced Gasoline Technologies      Section 9 - Advanced Light Duty Diesel      Section 10 - Hybrid/Electric Technologies

CLASS COST (INCLUDING MANUALS):

- NJGCA Member rates: \$635.00
- NON-Member rates: \$765.00

**TWO OPTIONS FOR CLASSES!** (day and night classes available!)

**OPTION A:** Four full-day classes. Four consecutive Wednesdays in July. **8:00 AM to 4:00 PM on July 1, 8, 15 and 22**

**OPTION B:** Two nights/week for four weeks (total of 8 nights). Tuesdays and Thursdays in May and June.  
**6:00 to 10:00 PM on May 19, 21, 26, 28. June 2, 4, 9 and 11.**

**TO REGISTER:**

Please complete the form below with all required information and fax it to 973-376-0766. Alternatively, you may also either scan the form or email the details below to Debbie Hill at [debbie@njgca.org](mailto:debbie@njgca.org).

**What Class Are You Enrolling in?** (*circle one*)

**CLASS 1:** ENTIRE ETEP

**CLASS 2:** RE-CERT **OPTION A** (DAY Class)

**CLASS 3:** RE-CERT **OPTION B** (NIGHT Class)

***STUDENT INFORMATION***

Full Name: \_\_\_\_\_ Last 4 Digits of Social Security #: \_\_\_\_\_

Full Address: \_\_\_\_\_

Cell: (\_\_\_\_) \_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Email Address: \_\_\_\_\_

***EMPLOYER INFORMATION***

Employer's Name: \_\_\_\_\_ Employer's Business Name: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Employer's Email Address: \_\_\_\_\_

***MEMBERSHIP AND PAYMENT***

Are you an NJGCA Member? YES or NO (*circle one*)      How are you paying? CHECK / CASH / CREDIT CARD (*circle one*)

***CREDIT CARD INFORMATION***

Card Type: VISA / MASTER CARD / AMERICAN EXPRESS (*circle one*)      Expiration Date: \_\_\_\_\_

Card Number: \_\_\_\_\_ Security Number (on back of card): \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_

Cardholder Billing Address: \_\_\_\_\_

Total Amount Charged: \_\_\_\_\_