



# ETEP TRAINING CLASSES

## EMISSION TECHNICIAN EDUCATION PROGRAM (ETEP) COURSE

NJGCA is offering the initial ETEP Certification Course for Members and Non-Members. The Entire Program includes sections 1- 7 and the NJ State Specific Course; everything you need to become a licensed Emission Repair Technician. Tests are given throughout the course and students that pass will receive a certificate to demonstrate they have passed the New Jersey Emission Technician Education Program (ETEP). This program, as offered through NJGCA, is a state approved course. In fact, NJGCA has provided this program to the NJ Department of Transportation, UPS, and NJGCA Members and Non-Members through out New Jersey. Our Pass rate on this class is 100% -- Sign up today!

### CLASS DETAILS:

#### **What's Included:**

- Section 1 through 7 ETEP Training and NJ State Specific Course
- No additional cost for Manuals – They are included

**Class Dates:** Eight (8) Full Days of Training on consecutive Wednesdays

February 20 <sup>th</sup>	March 20 <sup>th</sup>
February 27 <sup>th</sup>	March 27 <sup>th</sup>
March 6 <sup>th</sup>	April 3 <sup>rd</sup>
March 13 <sup>th</sup>	April 10 <sup>th</sup>

**Class Times:** From 8:00 am to 4:30 pm on all days

**Class Location:** NJGCA Headquarters, located at **66 Morris Avenue - Springfield, NJ 07081**

#### **Class Fees:**

- NJGCA Member Rates: \$1,495.00 (**save \$200.00 as a Member of NJGCA**)
- NON-Member Rates: \$1,695.00

### REGISTRATION FORM:

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)

#### STUDENT INFORMATION

Full Name: \_\_\_\_\_

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

Phone Numbers: Cell- \_\_\_\_\_

Work- \_\_\_\_\_

Date of Birth:        /        /

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

Are you a NJ Resident? YES or NO (*circle one*)

#### 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 for the class? CHECK / CASH / CREDIT CARD (*circle one*)

#### CREDIT CARD INFORMATION

Card Type: VISA / MASTER CARD / AMERICAN EXPRESS (*circle one*)

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

Expiration Date: \_\_\_\_\_

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

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

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

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