



Western  
Pennsylvania  
Chapter

ATTENTION ALL CONTRACTORS!

# Competent Scaffolding and Fall Protection Training

Monday March 19, 2012

1:00 p.m.—5:00 p.m.

ABC Chapter Office

3500 Spring Garden Avenue

Pittsburgh, PA 15212

Three of the top 10 OSHA standards cited reveal what OSHA inspectors are looking for when they see a construction site. The increase in deaths and injuries to workers from falls is leading to aggressive enforcement in our industry—with **scaffolding** as the most likely cited offense and **fall protection** the second most likely cited offense.

Compliance with the OSHA Fall Protection Directive is required by 9/15/2011. **Take this course and receive a FREE COPY of Fall Protection Directives to add to your safety manual for full compliance!**

Price per participant:	<b>\$125.00</b>
<b>ABC Member Discounted Price:</b>	<b>\$45.00</b>

**STEP SPECIAL!!! ALL STEP PARTICIPANT COMPANIES TAKE  
10% OFF!**

*To register, please fill out the form on the back of this page.  
All registrations must be received at least  
one week prior to the date of the course..*

# Associated Builders and Contractors of Western Pennsylvania

## Course Registration Form



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Chapter

Course Title: Competent Scaffolding and Fall Protection

Course Date: March 19, 2012 –1:00 p.m. -5:00 p.m.

*All registration forms must be received at least one week prior to course date. All courses are subject to minimum enrollment.*

### Company Information

Company: \_\_\_\_\_  
Company Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Company Fax Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Company Contact: \_\_\_\_\_  
Contact E-mail Address: \_\_\_\_\_

### Registrant Information

Name	E-mail Address
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

### Payment Information

Price per Registrant: \$\_\_\_\_\_ X Number of Registrants: \_\_\_\_\_ Total Amount Due:\$\_\_\_\_\_

How would you like to pay?

Check  
*Check payments may be mailed to: ABC of Western PA, Attention: Elizabeth, 3500 Spring Garden Avenue, Pgh., PA 15212*

Credit Card

Visa\*       Master Card\*      Security Code: \_\_\_\_\_

Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_      Expiration Date: \_\_\_\_/\_\_\_\_

Card Holder's Signature: \_\_\_\_\_

*Credit card payments may be faxed to 412.231.3201 (Attn: Kim) or E-mailed to kgrosel@abcwpa.org*

*\*Please note that credit card payments will not be accepted for less than \$100.00.*