

1065 Ahua Street
Honolulu, HI 96819
Phone: 808-833-1681 FAX: 839-4167
Email: gca@gcahawaii.org
Website: www.gcahawaii.org



GCA of Hawaii

GENERAL CONTRACTORS ASSOCIATION OF HAWAII

Quality People. Quality Projects.

FIRST AID/CPR CLASS

Friday, September 14, 2018 – 7:30 a.m. - 11:30 a.m

Registration

Classes are held at the
General Contractors Association
(1065 Ahua Street).

PLEASE PRINT NAMES

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

GCA MEMBERS
\$ 85.00

NON-MEMBERS
\$ 120.00

PAYMENT REQUIRED
WHEN SUBMITTING REGISTRATION.

To register, please fill out registration form and send:

gca@gcahawaii.org or
Fax #839-4167

Attendees will confirmed through EMAIL if there is a space available. We will no longer confirm through facsimile.

For billing purposes, please (✓) below where applicable:

Payment Enclosed **Total \$** _____

Please Bill Company. (GCA Member Only)

For credit card payment, please fill out the attached Credit Card Authorization Form.

Name: _____

Company: _____

E-mail: _____

Mailing: _____

City/Zip: _____

Phone: _____

FAX: _____

**ANY NO SHOWS AND/OR
CANCELLATIONS LESS THAN 3 DAYS
PRIOR TO THE START OF CLASS WILL BE
CHARGED A \$85 FEE.**

1065 Ahua Street
Honolulu, HI, 96819
Phone: (808) 833-1681
Fax: (808) 839-4167
Email: gca@gcahawaii.org
Website: www.gcahawaii.org



GCA of Hawaii

GENERAL CONTRACTORS ASSOCIATION OF HAWAII

Quality People. Quality Projects.

CREDIT CARD AUTHORIZATION FORM

COMPANY _____

CONTACT PERSON _____

EMAIL ADDRESS(PLS FILL) _____

PHONE _____

FAX _____

NAME OF GCA EVENT FIRST AID/CPR CLASS

DATE _____

AMOUNT TO CHARGE _____

CREDIT CARD NUMBER _____

3 OR 4 DIGIT CODE _____

EXPIRATION DATE _____

NAME ON CARD _____

BILLING ADDRESS _____

SIGNATURE _____

REQUEST COPY OF THE CREDIT CARD CHARGE

(Check line that applies)

- _____ Email @ _____
- _____ Mail
- _____ Fax
- _____ I do not need a copy