



**WATAI-ACCIDENT ANALYSIS &
RECONSTRUCTION, INC.**
2007 COLLISION RECONSTRUCTION UPDATE WITH EXCEL APPLICATIONS
APPLICATION FORM

Name: _____

Agency/Company Name: _____

Address: _____

Phone # _____

E-Mail _____

WATAI Member? Yes No If not, would you like some information on membership

FARO Member? Yes No

CURRENT MEMBERSHIP STATUS WILL BE VERIFIED PRIOR TO ACCEPTANCE OF PAYMENT.

Non-Member: Yes No

PAYMENT OPTION: (Check or agency PO#'s accepted only)

WATAI or FARO Member – 60 days or more (\$350.00) \$ _____

WATAI or FARO Member – Less than 60 days (\$450.00) \$ _____

Non-Member: 60 days or more (\$450.00) \$ _____

Non-Member: Less than 60 days (\$550.00) \$ _____

GRAND TOTAL: \$ _____

I understand that I must supply my own computer and associated accessories to attend this course. I also understand that a class seat will not be reserved until full payment is received. By signing below, I agree to the refund policy that was set forth in the class announcement. As this class will have some “hands-on” training that can expose you to hazardous environments, I also agree to indemnify and hold harmless the Washington Association of Technical Accident Investigators, Accident Analysis & Reconstruction Inc. and all involved individuals in any and all claims arising from the activities that occur during the Collision Reconstruction Update course held May 21-25, 2007. I agree to waive any and all claims against the above named entities. I also understand that this course is intended for those individuals who have successfully completed a prior class in Collision Reconstruction. As such, WATAI nor Accident Analysis & Reconstruction Inc., infer that upon successful completion of this course that the student can qualify themselves as a “Reconstructionist”.

Signed: _____

Date: _____