





Oregon Air Conditioning  
Contractors Association

# TEST Registration Form

ORACCA Order Form for Brazing Certification Tests

Return the completed form and make check payable to:

**ORACCA**

Oregon Air Conditioning Contractors Association  
P.O. Box 87907, Vancouver, WA. 98687-7907  
Voice: 360-834-3805 • Fax: 503-914-1999  
E-mail: dick@oracca.org

**FAX ORDERS WELCOME**

**With Credit Card  
VISA, M/C, AMEX**

Please make copies  
of this form to use for  
future orders

**\* Please fill in the requested test date**

Test Date \_\_\_\_\_

## REGISTRATION INFORMATION

Name \_\_\_\_\_ Company \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Company \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Company \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

## \*\* THE FOLLOWING INFORMATION WILL BE NEEDED TO SHIP BOOKS & FAX BACK CONFIRMATION

Name \_\_\_\_\_ Company \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Email \_\_\_\_\_

Phone Number \_\_\_\_\_ Cell \_\_\_\_\_

## METHOD OF PAYMENT

American Express

Master Card

Visa

Check

Credit Card # \_\_\_\_\_ Security Code \_\_\_\_\_

Cardholder's Name \_\_\_\_\_

Expiration Date \_\_\_\_\_ Check # \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Make checks ORACCA

Zip Code \_\_\_\_\_ payable to: P.O. Box 87907

Vancouver, WA. 98687-7907

## ORDERING INFORMATION - IMPORTANT - FILL OUT CONTACT INFORMATION BELOW

To get more information about ORACCA membership products and services  
Go To: [www.oracca.org](http://www.oracca.org)

Click on the Join/Renew tabs at the top of the home page.

**\* Please fill in the requested test date**

Test Date \_\_\_\_\_

ORACCA Member

Non Member

Catalog ID	Description	Qty	Unit Price	Total Cost
918TO	Section 918 Test - non member		\$325.00	
918TSO	Section 918 Test - member		\$225.00	
918RTW	Section 918 - retest Written Only		\$150.00	
918RTP	Section 918 - retest Practical Only		\$170.00	
918RTB	Section 918 - retest Both		\$225.00	
918MT	Section 918 Test - reschedule		\$ 35.00	
	Total			

## IMPORTANT STUDENT INFORMATION

- √ •During this session, our presenter will review the pertinent sections of the ORACCA manual.
  
- √ •The Seminar will be scheduled no sooner than a week after receipt of the test order. This is to allow the student sufficient time to review the text prior to the test. We shall begin with a class lecture on the subject matter contained in the text and test and conclude with the ORACCA approved written, multiple choice, certification test (Approximate 2 hour preparation lecture before test). The classroom session will be followed by the practical brazing lab. The course study guide for the written portion of the Brazing Certification test will be sent, upon registration. The written test is comprised of a 40 question, multiple choice test. The answers to the test are contained in the study material, so if you don't study, you may not pass. Your choice! Please spend time going over the study material. Do not expect to walk in and pass the test. The odds are against it. We send this information so that you can prepare for the material involved with the actual test.
  
- √ •The tests will be scored by ORACCA headquarters, P.O. Box 87907, Vancouver, WA. 98687-7907
  
- √ •In order to obtain certification, applicants must pass the written exam, in addition to successful completion of the practical lab brazing test. (80% is passing on written test and cumulative voids of less than 25% is passing for the lab).
  
- √ •Materials required for the Test are: 15% Silfloss and copper lab materials, **both supplied by ORACCA.**
  
- √ •**Each examinee must provide their own Oxy-Acetylene or B-tank Acetylene-air torch set, safety equipment (gloves, eye protection, etc.), measuring, cutting and reaming tools and cleaning materials (scotchbrite pad, plumbers tape, cleaning clothes, etc.). No maap gas sets will be allowed.**
  
- √ •**The cost for this certification exam is \$325.00 per participant, all ORACCA member company employees may take the course for a discounted fee of \$225.00.**

To insure a firm reservation for the exam, return this form **with your check, or credit card information** for the appropriate amount. Space is limited to 16 participants, per session...so register early. If you miss your assigned test date, there is a \$35.00 rescheduling fee to reassign you to the future class.

### THE FOLLOWING TESTING INFORMATION WILL BE FAXED BACK AS CONFIRMATION

Proctor's Name _____	Testing Facility _____
Text Book Sent Date _____	Address _____
Testing Date _____	City/State/Zip _____
Confirmation Sent Date _____	By _____

For ORACCA use only:

Date registration form received: _____	By: _____
Student information entered in database _____	By: _____
Test site information _____	
Address _____	
City _____	State _____ Zip _____
Test information _____	
_____	