

MOTOR CARRIER SAFETY REGULATIONS WORKSHOP OCTOBER 6 & 7, 2015 HTA CLASSROOM, 5:00 - 8:00 P.M.

HAVE A DRIVER SUPERVISOR ON DUTY LESS THAN 2 YEARS?

JUST STARTED TAKING CARE OF DRIVER FILES?

NO TIME TO KEEP UP WITH THE EVER CHANGING SAFETY REGULATIONS?

Come to HTA's last **2015 SAFETY REGULATIONS WORKSHOP** and do the job right the first time . . . or, at least, the next time right after attending the seminar!!!

We will cover: Drug Testing; Driver Files; Out Of Service Criteria; Hours of Service; and Vehicle Inspection and MORE!

Mail: Hawaii Transportation Association OR fax to: 808-833-8486

P.O. Box 30166 Honolulu, HI 96820

OR Email to <u>accounts@htahawaii.org</u>



CREDIT CARD AUTHORIZATION FORM

	Name of ca	ard holder as i	t appears on	the card		
	Bil	lling address o	of card holder			
		City / State /	Zip code			
Card type:	Card type: Master card Visa			American Express		
Amount of to	ansaction authorize	ed: \$				
Credit card	Credit card #		Expiration date		3/4 digit CID (back of card)	
(<u>)</u> Phon	<u>e</u>			Signature		
	<u>i</u>	HTA OFFICE	USE ONLY			
Order taken by	der taken by			Order #		
Accounts Receivat	ole: Inventory #s					
Safety Materials						
<u>Class</u>	<u>Month</u>					
Forklift Class/Eval Haz Mat Class DIP Class Pre-Trip CDL Training		Convention Golf Other Date of Autl Authorizatio Denied				