



MASC • Mid Atlantic Safety Council • www.ma-sc.org

**LCSC • LOW COUNTRY
SAFETY COUNCIL**
TEL: 843-797-8820 • FAX: 843-797-8809

1930 Hanahan Road • Suite 600
North Charleston, SC
charleston@ma-sc.org

BOP7:30am.....**WED, FRI**
BOPR9:00am.....**T-W-Th-F**
Site Specific9:00am.....**T-W-Th-F**

**TACSC • TRIAD AREA
CONTRACTOR SAFETY COUNCIL**
TEL: 910-762-9557 • FAX: 910-762-9547

1200 Surratt Drive
High Point, NC
triad@ma-sc.org

BOP8:00am.....**FRI**
BOPR8:00am.....**THUR**
Site Specific10:00am.....**THUR, FRI**

**WACSC • WILMINGTON AREA
CONTRACTOR SAFETY COUNCIL**
TEL: 910-762-9557 • FAX: 910-762-9547

5735 Highway 17 North
Vanceboro, NC
vanceboro@ma-sc.org

1536 Castle Hayne Road • 2nd Floor
Wilmington, NC
wilmington@ma-sc.org

BOP8:00am.....**TUE** **BOP**7:00am.....**WED, FRI**
BOPR8:00am.....**TUE** **BOPR**8:00am.....**T-W-Th-F**
Site Specific1:30pm.....**TUE** **Site Specific**8:00am.....**T-W-Th-F**

COMPANY NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____

CONTACT NAME _____

CONTACT EMAIL _____

A.R.S.C. COURSES

(prerequisite for most Site Specific Courses)
BOPBasic Orientation Plus™
BOPRBOP™ Refresher

OTHER COURSES

OSHA10g.....10 Hour, General Industry
OSHA10c10 Hour, Construction
CNFSPCConfined Space

SITE SPECIFIC COURSES

ALCO ..Alcoa Aluminum.....LCSC	FRTN ...Fortron.....WACSC
BPICBushy Park Ind. Cplx.....LCSC	GLWCorning Glassworks..WACSC
BPCBP Cooper RiverLCSC	KSAKAO SpecialtiesTACSC
BOSRobert S. BoschLCSC	MWVMeadWestvaco.....LCSC
DAKC ..DAK Americas.....LCSC	NVST ...Invista.....WACSC
DAKW .DAK Americas.....WACSC	PCSPCS Phosphate.....WACSC
DELL ...Dell Computer.....TACSC	RHO ...Rhodia.....LCSC
DOW ...Dow Corning.....TACSC	SHWI ...Sherwin Williams.....TACSC
DPTC ...DuPont Charleston.....LCSC	STOC ...Stockhausen.....TACSC
ELEM ..Elementis Chromium WACSC	VERT ...Vertellus Specialties...TACSC

Member Non-Member

PAYMENT METHOD

- Cash
Company Check
Visa/Mastercard
Credit Card on File
Invoice (member companies only)

PO NUMBER _____

TRAINING DATE

LOCATION

- Charleston, SC
Triad/High Point, NC
Vanceboro, NC
Wilmington, NC
Other _____

NAME (PLEASE PRINT First, Last)	SSN or MASC Badge #	<input type="checkbox"/> ALCO	<input type="checkbox"/> BPIC	<input type="checkbox"/> BPC	<input type="checkbox"/> BOS	<input type="checkbox"/> DAKC	<input type="checkbox"/> DAKW	<input type="checkbox"/> DELL	<input type="checkbox"/> DOW	TIME
		<input type="checkbox"/> BOP <input type="checkbox"/> BOPR	<input type="checkbox"/> DPTC	<input type="checkbox"/> ELEM	<input type="checkbox"/> FRTN	<input type="checkbox"/> GLW	<input type="checkbox"/> KSA	<input type="checkbox"/> MWV	<input type="checkbox"/> NVST	<input type="checkbox"/> PCS
		<input type="checkbox"/> RHO	<input type="checkbox"/> SHER	<input type="checkbox"/> STOC	<input type="checkbox"/> VERT					

ALL NORMALLY SCHEDULED CLASSES AND TESTS ARE CONDUCTED IN ENGLISH. IF OTHER LANGUAGES ARE REQUIRED, PLEASE CONTACT US.

FORM REVISED 09/16/09

All registrations will be confirmed prior to training date with SSN removed.