



NATURAL FIBER INSTALLERS CERTIFICATION  
CERTIFIED INSTALLER APPLICATION

Complete, sign and submit two page form with payment to NFIC 4 to 6 weeks prior to certification event.

Applicant Name: \_\_\_\_\_

Name Used: \_\_\_\_\_

Certification Location Attending: \_\_\_\_\_ Years in trade \_\_\_\_\_

Company or Company Sponsor: \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Birth Date: \_\_\_\_\_

Please list language, other than English, in which you are fluent: \_\_\_\_\_

Shirt Size (circle one)      LARGE                      X-LARGE                      XX-LARGE

Address to appear in the NFIC Website directory:

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Signature on this form verifies that the information on this page is true to the best of my knowledge. Any installer who does not pass has one year to return at an additional cost of \$25.00 fee to complete the original categories. I understand that the testing will involve installation procedures and equipment common to the industry, including all risks associated with installation activities. As further consideration for this opportunity, I specifically agree to release NFIC, its officers or employees from any and all claims and specifically waive all such losses against the Association and such persons. In the event my activities cause injury or damage to any other person or entity, then I agree to fully indemnify, hold harmless, defend and protect the Association and all related persons from such losses, including any losses caused in part by the negligence of such others, I fully understand that failure to conduct myself in a responsible manner during the testing program may result in my termination.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Each year that you are part of this organization there will be yearly dues of \$100.00

Mail To:  
NFIC,                                      Phone - 770 720-4537  
P.O. Box 4248                              Fax - 770 720-4671  
Canton, GA. 30114                              E-mail - nfic2006@yahoo.com