



**NFRC Approved Calculation Entity (ACE)
 One Day Workshop (for existing ACEs)
 December 3, 2010, 11:00 am EST – 4:00 pm EST
 Online via GoToMeeting®**

This workshop is for those who are already an NFRC Approved Calculation Entity (ACE). This workshop will go over specifics of being an ACE and provide the continuing education that is required by the NFRC 708 *Calculation Entity Approval Program*. Per NFRC 708, to maintain approval, an ACE must attend 2 workshops every 3 years. This workshop will include use of the latest version of CMAST; all training materials, including workbooks, will be provided to attendees before the workshop date. It required that participants download the CMAST software prior to the workshop. To download CMAST, go to the CMAST staging server: <http://69.60.115.189/>. You will need to download THERM 6 and WINDOW 6 before using CMAST, so be sure to follow the instructions for download provided on the webpage after you have registered yourself as a CMAST user and can log-in to the server.

There will be in-class review sessions and quizzes during the training, and a take-home exam will be provided for attendees to complete and submit after training. An updated *Certificate of Approval* will be sent to those ACE candidates who successfully pass the exam.

Each registrant must submit a registration form

Name: _____ **Company:** _____
Address: _____ **Telephone:** _____ **Fax:** _____
E-mail address: _____

As per the NFRC 708 Educational Requirements, I have a Bachelor's Degree or higher degree in engineering, or a closely related discipline, or a minimum of two years experience in fenestration product design and assembly. Details required: _____

I wish to attend the ACE Continuing Education Workshop (\$100)

Amount Enclosed: \$ _____

- *A laptop computer is REQUIRED for this course; NFRC will NOT provide.*
- *A high-speed Internet connection is required*
- *Registration is not confirmed until payment is received*
- *Space is LIMITED, workshop spots will be reserved on a first-come, first-serve basis; only the first 25 registrants will be able to attend.*

CREDIT CARD –VISA, MasterCard, American Express

Card# _____ **Exp** _____

Name if different from above: _____ **Zip Code of Credit Card Billing Address:** _____

Signature: _____

Check, made payable to “NFRC”

**PLEASE RETURN THIS FORM TO NFRC BY EMAIL TO jpadgett@nfr.org
 NO LATER THAN **November 19, 2010****