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Contact Information:
866-529-WELD (9353)
weld-ed@lorainccc.edu
www.weld-ed.org

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AFFILIATE CONTACT INFORMATION

Prefix: (select one) Dr. _____  Mr. _____  Mrs. _____  Ms. _____  Other _____

First Name:______________________________________________________________

Last Name:_____________________________________________________________

Title:______________________________________________________________

Department:____________________________________________________________

Institute:_____________________________________________________________

Address:_____________________________________________________________

City: ___________________________  ST: _______________  ZIP: _______________

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AGREEMENT

By signing or typing your name below, you are affirming that you: 1) meet all affiliation and eligibility requirements and agree to the terms of affiliation as outlined in Section 1: Affiliate Eligibility & Enrollment; and, 2) have provided affiliate contact information as requested in Section 2: Affiliate Contact Information.

Signature_________________________________________________________  Date________________

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