



International Glove Association
1593 Brocius Road
Brookville, PA 15825
Phone: 814-328-5208
Fax: 814-328-2308

Certification Application – Cut, Abrasion and Puncture

Date: _____
Company Name: _____
Contact Name: _____
Contact Phone Number: _____
Company Address: _____
City: _____ State: _____ Zip: _____

Test Requested: (After each product name or part number, check the type of test desired. Additional product test requests may be written on the back of this form, or an additional sheet of paper.)

*Product Name/Part Number: _____
Cut and Abrasion: _____ Puncture: _____

*Product Name/Part Number: _____
Cut and Abrasion: _____ Puncture: _____

*Product Name/Part Number: _____
Cut and Abrasion: _____ Puncture: _____

**We require an initial minimum of 5 pieces of each type (style) being submitted for certification testing.*

Payment must be included with your order and the gloves to be tested. Checks or money orders should be made payable to: "International Glove Association"; or you can pay by Credit Card using the space provided below. All payments are to be made in U.S. funds.

Fees per Certification Test: (Cut & Abrasion are mandatory for certification. Puncture is optional.)
Cut Resistance and Abrasion test: \$550.00 Puncture test: \$200.00

Shipping Fees: Shipping fees are the responsibility of the applicant. Please indicate the account number that you wish to charge: UPS: _____ FedEx: _____

<p>If Paying by Credit Card: Circle Type of Card</p> <p>American Express Visa Master Card Discover</p> <p>Name on Card: _____</p> <p>Card Number: _____</p> <p>Expiration Date: _____ Signature Code: _____</p> <p>Signature: _____</p>
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<p>Total Number of Tests Applied for: _____</p> <p>Total Amount Paid: _____</p>

Send gloves to above address.