



COLD Registration Form

February 18 – 19, 2025

Illuminate '25 Clearwater Beach, FL

Registrations must be received by January 15, 2025.

Limited class size of 20 students. When the limit is reached, applicants will be placed on a waitlist and receive first availability for the following year.

Name: (please print) _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Mobile: _____

Fax: _____ Email: _____

Will you be attending Illuminate – AOLP’s Annual Conference? Yes No (separate registration required)

I am an AOLP member. If yes, for how long? _____

How did you hear about the COLD program?

- AOLP
- Social Media
- COLD Graduate
- Colleague
- Illuminate Conference
- Internet Search
- Industry Recommendation
- Trade Publication
- Other (please specify) _____

Have you been in the lighting industry for at least 2 years? _____

Where did you obtain your experience? Please list all applicable companies and roles: _____

Describe your experience in the lighting industry: _____

List any trainings and/or other certifications (if any): _____

Why would you like to become a Certified Outdoor Lighting Designer? _____



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Only checks in U.S. Funds drawn on a U.S. Bank payable to AOLP will be accepted. Your complete registration must be received **no later than January 15, 2025.**

Cancellation Policy: Cancellation requests must be in writing. Requests received by **January 15, 2025.** will receive a 75% refund. No refunds on requests received after January 15, 2025.

REGISTRATION RATE AND PAYMENT:

\$975 AOLP Member **\$1,450 Non-Member**

**COLD is a 2-year program. Your fee will cover in-person sessions for 2025 and 2026 and all virtual sessions in between. Attendance at the in-person sessions of 2 CONSECUTIVE CONFERENCES, as well as the virtual sessions are mandatory for completing the program. By registering for the exam, you are committing to participate on these dates. If you are unable to attend a session, please contact certification@aolponline.org as soon as possible to request committee approval. View the 2025 – 2026 schedule at aolponline.org/cold.*

PAYMENT INFORMATION:

Total Amount Due: \$ _____

Check Enclosed (payable to AOLP) Visa MasterCard Discover AmEx

Credit Card Number: _____

Exp. Date: _____ Security Code: _____

Name on Card: _____ Signature: _____

Billing Address (if different from above): _____

Questions? Call AOLP at 717.238.2504 or email certification@aolponline.org.

Send form and payment to: AOLP, 2207 Forest Hills Drive, Harrisburg, PA 17112

Email to: admin@aolponline.org or fax to: 717.238.9985

717.238.2504 | www.aolponline.org