

# "Speed from Crush"

POST Course Title: Traffic Collision Vehicle Dynamics

Presented by Rudy Degger (WeCARE)

September 27-October 1, 2021 ~ POST Number 1122-33603-21-001

## DESCRIPTION



### Student Case Studies



- ◆ Energy & Damage Calculations and Analysis
- ◆ Calculate Speeds & Delta -V from Crush Profile
- ◆ Student Field Exercises: *Hands-On Measurement of Crush Profiles*
- ◆ Practical Application: *Calculations made using Student Field Exercises*
- ◆ Research and properly use the NHTSA Vehicle Crash Test Database
- ◆ Calculate A-B-G Stiffness Coefficients
- ◆ Force Balance Calculations and Adjustment of Stiffness Values
- ◆ Calculate and Apply Effective Mass Ratio
- ◆ Triangle Speed Analysis Using Delta-V

## PREREQUISITE

Successful completion of *Advanced Accident Investigation* and *Traffic Accident Reconstruction* or similar class. Students should have a good working knowledge of basic algebra .

**INSTRUCTOR:** Rudy Degger, ACTAR

**STUDENT MUST BRING A LAPTOP COMPUTER. POWERPOINT & HANDOUTS ARE PROVIDED AS PDF FILES ON A THUMB DRIVE. THE LAPTOP MUST HAVE MICROSOFT EXCEL INSTALLED. BASIC INSTRUCTION FOR BUILDING & USING SPREADSHEETS TO MAKE CALCULATIONS IN-CLASS, IS A PART OF THE COURSE CURRICULUM.**

**DATE:** Sept. 27 - Oct. 1, 2021 (40 hour class)

**TIME:** Monday - Friday 8:00 a.m. - 5:00 p.m.

**LOCATION:** Hyatt Hotel

2611 Contra Costa Blvd  
Pleasant Hill, CA 94523

## Contact for Information & Registration:

Nancy Degger - WeCare Manager  
Office: 877-944-5903 Cell: 530-927-9748  
email: [wecare4recon@gmail.com](mailto:wecare4recon@gmail.com)

Host Hotel: Hyatt House Hotel in downtown Pleasant Hill.  
2611 Contra Costa Blvd. PH, CA 94523 \* 925.934.3343

Free parking, walk to coffee, restaurants, shops, theater.  
Short drive to Contra Costa Center BART and Walnut Creek

Hyatt Hotel will offer a discounted rate for students closer to the class date. A code will be sent to all confirmed students.

## \*TO REGISTER:

Complete the attached registration form. Mail or Email it along with your payment payable to We.C.A.R.E.

**B: (877) 944.5903 or mobile: (530) 927.9748**

**Email: [wecare4recon@gmail.com](mailto:wecare4recon@gmail.com)**

**TUITION - Payable to WeCARE**

\$500.00 paid on or before 8/27/2021

\$550.00 paid after 8/27/2021

\$600.00 paid after 9/14/2021

Checks payable to WeCARE, MC, VISA, AMEX accepted.

**Please review our cancellation policy.**

**Please note: All classes have a covid vaccine verification policy**



**WeCARE**

**West Coast Accident  
Reconstruction Education  
WeCARE is a POST provider**

PO Box 1647 Graeagle, CA 96103

B: (877) 944.5903 Mobile: (530) 927.9753

[wecare4recon@gmail.com](mailto:wecare4recon@gmail.com)

[www.rudydegger.com](http://www.rudydegger.com)

# "Speed from Crush"

POST Course Title: Traffic Collision Vehicle Dynamics  
Presented by Rudy Degger (WeCARE) in Pleasant Hill, CA  
Sept. 27-Oct. 1, 2021 ~ POST Number 1122-33603-21-001

## How To register:

- 1) Please use one registration form per student. Please print or type COMPLETE information.
- 2) Payments may be combined for more than one student per department.
- 3) Early registration and payment deadline is listed below.
- 4) If paying Credit Card, Email this form with credit card information to **wecare4recon@gmail.com**
- 5) If paying by check, mail this form along with your payment (payable to WeCARE) to **WeCARE, PO Box 1647, Graeagle, CA 96103.**

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## STUDENT INFORMATION:

**Student Name:** \_\_\_\_\_

**POST ID #:** \_\_\_\_\_

**Department:** \_\_\_\_\_

**Contact Phone:** \_\_\_\_\_

**Student E-mail:** \_\_\_\_\_

**Training Manager E-mail:** \_\_\_\_\_

## Registration Options:

\$500.00 paid before 8/27/21 \*\*

\$550.00 paid after 8/27/21

\$600.00 paid after 9/14/21

*\*\*Cancellation Policy: If you cancel before 8/27/21 tuition will be refunded less \$50 for processing. Cancellation after 8/27/21 there is no refund. Agencies may substitute a student for this class, or the tuition may be applied to a future Crush class.*

**Please note: All classes have a covid vaccine verification policy**

PAYMENT METHOD:     Check # \_\_\_\_\_ PO # \_\_\_\_\_

Credit Card.....     VISA     MC     AMEX

Card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Security Code \_\_\_\_\_

Email Receipt To: \_\_\_\_\_

Name on Credit Card: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Credit Card Billing Address: \_\_\_\_\_ Zip: \_\_\_\_\_

For Wecare administration only: received \_\_\_\_\_ confirmed \_\_\_\_\_ paid \_\_\_\_\_ receipt # \_\_\_\_\_