

Registration Form: Securing Drinking Water and Wastewater Treatment Facilities

(Photo ID required at door)

Please complete one form per attendee
Approved for 5 PA DEP Contact Hours

ATTENDEE ___ \$100 AWWA/WWOAP Member ___ \$125 Non-Member

***Lunch is provided!**

NAME: _____

COMPANY: _____

PA DEP Operator Client ID # _____

TITLE: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

TELEPHONE: _____ FAX: _____

EMAIL: _____

Date: **Thursday, October 18, 2012; Registration: 8:00 a.m. Course: 8:30 a.m. to 3:00 p.m.**
Location: **Erie Bayfront Conference Center, Erie, PA 16507**
Address: **1 Sassafras Pier Erie, PA. 16507**
Phone: **(814) 455-1260**

Method of Payment: (Confirms registration)
Attendee Fee: \$100.00 (AWWA/ WWOAP Member) -- \$125.00 (Non-Member)

***Note: There will be an additional \$25 fee for on-site registration.**

Make checks payable to PA Section AWWA.

Mail Registration and Payment to PA Section AWWA, P. O. Box D, New Cumberland, PA 17070
Fax Registration with Credit Card information to: (717) 774-0288

Total Payment \$ _____

- | | | |
|---|--|---|
| <input type="checkbox"/> Personal Check | <input type="checkbox"/> Company Check | <input type="checkbox"/> Government P.O. |
| <input type="checkbox"/> Master Card | <input type="checkbox"/> Visa | <input type="checkbox"/> American Express |

Credit Card No. _____ Exp. Date _____

Signature _____

Special Needs _____

All cancellations must be received in writing, on company letterhead, and sent to the PA Section - AWWA. All cancellations received 14 days prior to the event will receive a REFUND less a 25% administrative fee; fewer than 14 days prior to the event, no refunds will be granted. Substitute registrants are welcome - fax substitution requests to (717) 774-0288.

Phone: (717) 774-8870 Fax: (717) 774-0288
Email: mikesnyder@paawwa.org
Website: www.paawwa.org
