

# Registration Form: Essentials for Emergency Preparedness

(Photo ID required at door)

Please complete one form per attendee

Approved for 6 PA DEP Contact Hours

ATTENDEE \_\_\_ \$50 AWWA/WWOAP Member \_\_\_ \$75 Non-Member

**\*Lunch is provided!**

NAME: \_\_\_\_\_

COMPANY: \_\_\_\_\_

PA DEP Operator Client ID # \_\_\_\_\_

TITLE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_

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**Date:** Wednesday, February 18, 2009; **Registration:** 8:30 – 9:00 a.m. **Course:** 9:00 a.m. to 4:15 p.m.  
**Location:** Lehigh County Pretreatment Plant  
**Address:** 7676 Industrial Blvd., Allentown, PA 18106  
**Phone:** 610-395-9782 **Directions:** Visit <http://www.lehighcountyauthority.org/index.cfm?pag=116>

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**Method of Payment:** (Confirms registration)  
Attendee Fee: \$50.00 (AWWA/ WWOAP Member) -- \$75.00 (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 \$ \_\_\_\_\_

Personal Check

Company Check

Government P.O.

Master Card

Visa

American Express

Credit Card No. \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

Special Needs \_\_\_\_\_

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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](mailto:mikesnyder@paawwa.org)

**Website:** [www.paawwa.org](http://www.paawwa.org)

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