

# 2010 Spring - CTAWWA COURSE REGISTRATION FORM

## HOW TO REGISTER FOR CTAWWA COURSES

**Part I** – Please complete this entire section including daytime telephone, fax, email, and AWWA or NEWWA member number if applicable. **The address should be your billing address for these courses.**

**Part II** – Please check (✓) which course(s) you will be registering for.

**Part III** - Please indicate the method of payment by checking the appropriate box and filling in the **TOTAL FEE** box. If you will be paying by credit card, **it is very important that you include the card number and expiration date.**

Keep a copy of the course dates and directions then return the completed registration form with payment by Mail to: Pam Monahan, Executive Manager, CTAWWA, 72 Rockland Avenue, Waterbury, CT 06708. Or fax to (203) 725-0445 (NEW FAX NUMBER).

## PART I - PARTICIPANT INFORMATION

Name (As you want your name to appear on CEU Certificate)		Daytime Phone	
Company		Fax	
Billing Address			
City		State	Zip
Email		AWWA/NEWWA Member # (if applicable)	

## PART II - COURSE LISTING

✓	Course Code	Course Title	Date/Time	Member/ Non- Member Fee
	Spring 1001	Water Treatment Operations School (Deadline 1.19.10)	January 26, 2010 6:00 PM – 8:00 PM	\$500.00/ \$550.00
	Spring 1002	Treatment Plant Instrumentation (Deadline 3.18.10)	March 25, 2010 8:30 AM – 12:15 PM	\$80.00/ \$125.00
	Spring 1003	Business 101 (Deadline 4.8.10)	April 15, 2010 9:00 AM – 3:30 PM	\$100.00/ \$145.00
	Spring 1004	DPH Operator Certification Review (with book)(Deadline 5.18.10) NO WALK-INS	May 25, 2010 9:00 AM – 3:30 PM	\$140.00/ \$180.00
	Spring 1005	DPH Operator Certification Review (no book) (Deadline 5.18.10) NO WALK-INS	May 25, 2010 9:00 AM – 3:30 PM	\$90.00/ \$130.00
	Spring 1006	Business Writing for Everyone (Deadline 6.3.10)	June 10, 2010 9:00 AM – 4:00 PM	\$100.00/ \$145.00
		For registration for other CTAWWA courses offered, visit the website at <a href="http://www.ctawwa.org">www.ctawwa.org</a>		

## PART III - METHOD OF PAYMENT

Type of Payment			Total Amount	
<input type="checkbox"/> Check (Payable to <b>CTAWWA</b> ) <input type="checkbox"/> P.O.# _____ <input type="checkbox"/> MasterCard/Visa <input type="checkbox"/> AMEX			\$ _____	
Credit Card #	Exp.	CCV	Signature: _____	

**Cancellation Policy:** If you need to cancel, you must contact CTAWWA in writing at least two business days prior to the start of the course. If you contact CTAWWA within one business day, you will be charged 100% of the original course registration fee. This charge is non-refundable and non-transferable. Written refund/credit requests for special circumstances will be considered if received within two weeks from the start date of the program. Credit issues are valid for six months from the date of the program.

Check here if you have a disability and require accommodations to fully participate. You will be contacted by CTAWWA. 

**TOTAL FEE ENCLOSED \$** \_\_\_\_\_  
For additional registrations, please reproduce this form.