

# “EARLY BIRD” WORKSHOP REGISTRATION 2009

	WORKSHOPS	DATE	LOCATION	OEPA CONTACT HOURS	FEE
<input type="checkbox"/>	Water Workshop	March 3 & 4, 2009	Columbus	12.0	285.00
<input type="checkbox"/>	Wastewater Workshop	March 24 & 25, 2009	Columbus	12.0	285.00
<input type="checkbox"/>	Municipal Pretreatment	May 18, 2009	Columbus	6.0	155.00
<input type="checkbox"/>	Wastewater Lab	May 19, 2009	Columbus	6.0	155.00
<input type="checkbox"/>	Water Lab	May 20, 2009	Columbus	6.0	155.00
<input type="checkbox"/>	Wastewater Collection System	April 28 & 29, 2009	Wilmington	12.0	285.00
<input type="checkbox"/>	Wastewater Collection System	Northern Ohio RSD	TBA	6.0	155.00
<input type="checkbox"/>	Class III & IV Workshop	August 12 & 13, 2009	Columbus	12.0	285.00
<input type="checkbox"/>	Water Distribution	December 8 & 9, 2009	Columbus	12.0	285.00
<input type="checkbox"/>	Procrastinator's Workshop (\$165 per day)	December 10 & 11, 2009	Columbus	12.0	285.00

All workshops are held at the Ramada Plaza Hotel in Columbus, Ohio unless marked with an \*. Refreshments breaks & lunch provided. Prices and Dates are subject to change with the financial year.

*These OTCO workshops are designed for the water and wastewater professionals who want to keep abreast of the latest treatment processes, installation techniques, laboratory procedures, management ideologies, plant optimizations, along with USEPA & Ohio EPA regulatory updates. OTCO has been presenting these types of workshops since 1964. Full traditional itemized detailed flyers will be mailed throughout the year within 5-6 week of each event.*

*Curtis L. Truss Jr., Executive Director*

• **PRINT OR TYPE ALL INFORMATION BELOW**

NAME:			OTCO STUDENT ID#:		
FIRST	M.	LAST			
MAILING ADDRESS:					
<input type="checkbox"/> WORK	<input type="checkbox"/> HOME	(please check location of mailing address)			
CITY:			STATE:		ZIP:
WORK PHONE: (     ) -     EXT:			HOME PHONE: (     ) -		
FAX #: (     ) -			E-MAIL:		
PRESENT EMPLOYER:					
Title:					

PERSON FILLING OUT PAYMENT INFORMATION:

NAME:					
FIRST	M.	LAST	TITLE		
CHECK / MONEY ORDER NUMBER:					
PURCHASE ORDER NUMBER:					
IF PAYING BY CREDIT CARD, CHECK CARD USING FOR PAYMENT					
<input type="checkbox"/> VISA	<input type="checkbox"/> MASTERCARD	<input type="checkbox"/> DISCOVER	<input type="checkbox"/> AMEX	Expiration Date:     /     /	
CREDIT CARD NUMBER			-     -     -		
NAME ON CARD (PLEASE PRINT)					
SIGNATURE OF CARD HOLDER:x					

**\*FEEL FREE TO PHOTOCOPY APPLICATIONS AS NEEDED\***

PLEASE MAIL OR FAX COMPLETED APPLICATION TO:

OPERATOR TRAINING COMMITTEE OF OHIO  
3972 INDIANOLA AVENUE, COLUMBUS, OHIO 43214  
Phone (614) 268-6826    ♦    Fax (614) 268-3244    ♦    [www.ohiowater.org](http://www.ohiowater.org)