

# “EARLY BIRD” WORKSHOP REGISTRATION 2010

	WORKSHOPS	DATE	LOCATION	OEPA CONTACT HOURS	FEE
<input type="checkbox"/>	Wastewater Collection System	TBA		12.0	285.00
<input type="checkbox"/>	Wastewater Workshop (\$165 per day)	March 9 & 10, 2010	Columbus	12.0	285.00
<input type="checkbox"/>	Water Workshop (\$165 per day)	March 23 & 24, 2010	Columbus	12.0	285.00
<input type="checkbox"/>	Municipal Pretreatment	May 11, 2010	Columbus	6.0	155.00
<input type="checkbox"/>	Wastewater Lab	May 12, 2010	Columbus	6.0	155.00
<input type="checkbox"/>	Water Lab	May 13, 2010	Columbus	6.0	155.00
<input type="checkbox"/>	Class III & IV Workshop (\$165 per day)	August 17 & 18, 2010	Columbus	12.0	285.00
<input type="checkbox"/>	Water Distribution Workshop (\$165 per day)	December 8 & 9, 2010	Columbus	12.0	285.00
<input type="checkbox"/>	Procrastinator's Workshop (\$165 per day)	December 14 & 15, 2010	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. Please indicate if only attending one day.

*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:					

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 PAYMENT AND 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)