

OREGON ASSOCIATION OF WATER UTILITIES

935 N. Main Street, Independence, OR 97351 Phone: (503) 837-1212 Fax: (503) 837-1213 www.oawu.net

WATER TREATMENT, WATER DISTRIBUTION CERTIFICATION REVIEW

Prepare to take your state certification exam

Date: April 4-5, 2017 June 6-7, 2017

Location: **Shilo Inn**
Capitol Room
3304 Market St. NE
Salem, OR 97301

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Lodging: Shilo Inn Suites Hotel
Direct: 503-581-4001
Government Rate: \$75.00 + Tax

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Time: 8:00 AM to 4:30 PM
Lunch from 12:00-1:00 (on your own)

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Cost: Member Benefit Discount Fee: **\$280.00**
*Standard Registration Fee: **\$355.00**
**Each nonmember individual who attends will receive a one-year complimentary OAWU Individual Membership*

CEUs: 1.4 Total Water/0.7 Wastewater CEUs ESAC# 2787

Instructors: **Heath Cokeley, Hans Schroeder** OAWU Personnel

Course Description: Are you prepared for the upcoming exams? Let OAWU help prepare you with this two day review to brush up your terminology, system operations, maintenance requirements and math (bring your calculators). After study and this review, you will be ready for your levels I&II WD/WT certification exam. **BRING A CALCULATOR.**

REGISTRATION POLICY: OAWU reserves the right to cancel this class 7 days prior to class date for lack of registrations. **NO REFUNDS** will be issued and **REGISTRANTS WILL BE BILLED** who fail to attend and do not give a 7 days prior notice.

CONFIRMATION POLICY: Please keep a copy of your registration form as confirmation or you may contact OAWU to confirm receipt of your registration.

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OAWU Pre-Registration Form: WT/WD Certification_Review Salem April 4-5, 2017 Salem – June 6-7, 2017

Name: _____ Water Cert. # _____
Name: _____ Water Cert. # _____
City/System Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ System E-mail: _____

Cost: Member Benefit Discount Fee: **\$280.00**
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Payment Enclosed Please Bill P.O. # _____

If paying by credit card, please use PayPal online at www.oawu.net or call the OAWU office for processing and receipt.

Fax receipt to fax # _____ Email receipt to _____

Please return this form to OAWU 935 N. Main St., Independence, OR 97351 or Fax: (503) 837-1213 or email office@oawu.net