



H2O KNOW REGISTRATION FORM

Attendee Name: _____
 Attendee Mailing Address: _____
 City: _____ State: _____ Zip: _____
 Cell Phone: _____ Home Phone: _____
 Attendee E-mail: _____
 Company Name: _____
 Company Address: _____
 City: _____ State: _____ Zip: _____
 Company Phone: _____ Fax: _____
 AWWA Member #: _____

(Differs from CA-NV AWWA Certification #)

***Registration will not be processed without PAYMENT**

Payment Method: Check ____

Make checks payable, in U.S. funds, to CA-NV AWWA

Check # _____ PO # _____
 (Must be accompanied by a physical copy of the Purchase Order)

Payment Method: Credit Card: Visa ____ **MC** ____ **AMEX** ____

Name on Card: _____

Credit Card # _____

Exp. Date: _____ Billing Zip Code: _____
 (must be zip code in which credit card statement is mailed)

Authorized Signature: _____

If you need a copy of your receipt, please enter e-mail address:
 E-mail _____

PROGRAM RATES

	Member	Non-Member
Technical & Safety Offerings	\$229	\$299

CONTACT HOURS

Upon course completion, individual users can access and print their certificate of completion and review a history of completed courses.

Please fill out this form completely and mail in with check, money order or purchase order to:

CA-NV Section AWWA
10435 Ashford St., 2nd Floor
Rancho Cucamonga, CA 91730

or fax in with credit card information or a physical copy of the purchase order to (909) 291-2107 (secure fax line).

For registration inquiries please call (909) 481-7200.

