

Registration Form

2012 CERTIFICATION TRAINING PROGRAM

Print or type one name per form only. If more than one person is attending from the same office or department, please duplicate this form and complete for each person. Separate payment is not required.

Name _____ E-mail _____

Company Name _____

Company Address _____

City _____ State _____ Zip _____

Daytime Telephone: (_____) _____

Do you presently hold a license that requires you to recertify? (if you choose yes, you will need to complete a Recertification Registration Form instead) Yes No

Choose the location of your choice and place an "X" on the line next to the category session you will attend:

Springfield – January 4th

After December 28 fee is \$105

- ____ 1a – Ag Plant <1>
- ____ 1b – Ag Animal <2>
- ____ 3 – Ornamental/Turf <3>
- ____ 4 – Seed treatment <4>
- ____ 7a – General Structure <5>
- ____ 7a/7b – General Structure/Termite <6>
- ____ 7b – Termite <7>

Columbia – January 9th

After December 31 fee is \$105

- ____ 1a – Ag Plant <17>
- ____ 1b – Ag Animal <18>
- ____ 2 – Forest <19>
- ____ 3 – Ornamental/Turf <20>
- ____ 4 – Seed Treatment <21>
- ____ 5 – Aquatic <22>
- ____ 6 – Right Of Way <23>
- ____ 7a – General Structure <24>
- ____ 7a/7b – General Structure/Termite <25>
- ____ 7b – Termite <26>
- ____ 7c – Fumigation <27>
- ____ 8 – Public Health <28>
- ____ 11 – Wood Products <29>

Kansas City – January 18th

After January 11 fee is \$105

- ____ 1a – Ag Plant <43>
- ____ 1b – Ag Animal <44>
- ____ 3 – Ornamental/Turf <45>
- ____ 4 – Seed Treatment <46>
- ____ 6 – Right Of Way <47>
- ____ 7a – General Structure <48>
- ____ 7a/7b – General Structure/Termite <49>
- ____ 7b – Termite <50>

St. Louis – January 25th

After January 18 fee is \$105

- ____ 1a – Ag Plant <67>
- ____ 1b – Ag Animal <68>
- ____ 3 – Ornamental/Turf <69>
- ____ 4 – Seed Treatment <70>
- ____ 6 – Right Of Way <71>
- ____ 7a – General Structure <72>
- ____ 7a/7b – General Structure/Termite <73>
- ____ 7b – Termite <74>
- ____ 8 – Public Health <75>

Please fill out the reverse side of this form to complete your registration.

REGISTER ONLINE AT <http://muconf.missouri.edu/commercialpat>

For Office Use Only CEIS # 118895 Customer ID # _____ Receipt # _____

Name _____

COST OF TRAINING\$ 80.00

If mailed after pre-registration date for each location as shown, add \$25 late fee.

LATE FEE\$ _____

TOTAL AMOUNT ENCLOSED\$ _____

Make checks payable to: University of Missouri

and mail to: Commercial Pesticide, 348 Hearnnes Center, University of Missouri, Columbia, MO 65211

For Credit Card Registrations: ___ MasterCard ___ VISA ___ Discover

Card # _____

Expiration Date _____ / _____ CSV (3-digit number on back of card) _____

Authorized Signature _____ Printed Name _____

Address if different than registrant _____

Register by Phone or Fax with your credit card to:

PHONE: toll-free: (866) 682-6663 or (573) 882-9551

FAX: (573) 882-1953

REGISTER ON-LINE: <http://muconf.missouri.edu/commercialpat> (with credit card only)

Payment must accompany registration.
Registrations will not be processed without payment.

Registration Checklist

Did you:

- _____ Indicate what location you are attending with an "X" next to the category session?
- _____ Make a copy of your registration form for your records?
- _____ Understand the Refund Policy?
- _____ Make your hotel reservations, if needed?

If you have any disability that requires special materials or services, contact Rhonda Clayton at (573) 882-9551 or Relay Missouri: 1-800-735-2966.

By registering I give my permission to distribute my name and contact information to conference attendees and vendors. If I prefer not to be included in these distributed lists, I will include a written request with my registration for my contact information to be omitted.

This program is sponsored by University of Missouri, College of Agriculture, Food and Natural Resources, MU Conference Office, and the Missouri Department of Agriculture.

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