

WATER AND WASTEWATER OPERATOR TRAINING

Pre-Registration Form

CLASS LOCATION _____

Instructor(s): KIKI WARREN AND KATE CUNNINGHAM

Total Hours of Course: 16 OR 24 _____ HRS

Course Beginning Date: _____

Circle your class needs:

CEH or Certification

Water 1 2 3 4

Wastewater 1C 1 2 3 4

Students:

| NAME & SYSTEM NAME | Area Code & Phone # | Operator # |
|--------------------|---------------------|------------|
| _____ | H:(_____)_____ | _____ |
| _____ | W:(_____)_____ | |
| _____ | | |

Please send check with pre-registration form

Consulting Services of Alabama
P.O. Box 168
Northport, Al. 35476
205-394-1378
e-mail: hadjiwarre@aol.com
WWW.CONSULTINGSERVICESOFALABAMA.COM