

***BACKFLOW PREVENTION ASSEMBLY  
REPAIR & MAINTENANCE COURSE***

The North Carolina Rural Water Association (NCRWA) is pleased to provide you with Backflow Prevention Assembly Repair & Maintenance Course. This three day course is designed to equip the certified tester with hands on experience in the repair and maintenance of backflow assemblies, advanced testing, repair and troubleshooting and safety procedures. It is recommended that before you participate in this course that you are a state certified ORC and/or a certified backflow tester. This course provides 19.0 CEU's for the NC Water Treatment Facility Operator Certifications.

This seminar is limited to **12** participants on a first come first served basis and will begin promptly at 8:00am daily.

Payment must accompany the registration form in order to reserve a place in the class.

The fee to attend is \$240.00. Late registration is \$265.00.

***(If this application is postmarked or faxed after the 10th day prior to the start of class, a \$25.00 late fee will be assessed.)***

Checks, MasterCard or Visa are acceptable forms of payment.

**\*\* NO REFUNDS\*\***

Once payment is received, a confirmation letter will be mailed, faxed or emailed to the attendee.

**DATE & LOCATION**

**November 22-24, 2010**

City of Durham  
Water Management Administration  
1600 Mist Lake Dr.  
Durham, NC 27704

**Please mail registration and make check payable to:  
NCRWA PO Box 540 Welcome, NC 27374.  
Credit card registrations may be faxed to (336) 731-8589.**

**Registration Form**

*"Backflow Prevention Assembly Repair & Maintenance Course"*

Name: \_\_\_\_\_

*(Please print name as it should appear on training certificate)*

System/Employer: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_, NC Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

Circle Card Type:    Visa                    MasterCard

Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_

I authorize NCRWA to charge \$\_\_\_\_\_ to the card # listed.

Signature of cardholder: \_\_\_\_\_

***Should you have further billing or registration questions,  
please contact the NCRWA office at (336) 731-6963.  
Please Contact Ronnie West at (919) 812-2940  
with class related questions.***