



***Wastewater
Collection
Grade I
Certification
School
(BE130799)***

**NORTH CAROLINA RURAL WATER
ASSOCIATION INC.
WELCOME, NC
(336) 731-6963
www.ncrwa.com**



North Carolina Rural Water Association, Inc.
Post Office Box 540
Welcome, NC 27374
www.ncrwa.com

**There are no requirements
to take this school.
Anyone wishing to obtain
the Wastewater Collection
Grade I Certification
is eligible to attend.**

Benefits include:

- Local Location
- Reduced Travel Cost
- Smaller Class Sizes
- One Day Per Week
Schedule
- Competitively Priced

Presorted Standard
US Postage
PAID
Welcome, NC
Permit No. 12

Registration Form

“NCRWA Wastewater Collection Grade I School”

September 2010 – Denver, NC

In an effort to meet the needs of our collection system operators, the North Carolina Rural Water Association (NCRWA) presents a one-day per week, three week Wastewater Collection Grade I School. This school is designed to prepare operators for the collection grade 1 certification examination.

This school is limited to **30** participants and a fee of \$225.00 will be required to attend. Registrations received after August 30, 2010 will incur a \$25.00 late fee. Attendees will need to bring pen and paper to the first session. Further supply requirements will be given on the first day.

This NCRWA Wastewater Collection Grade I School has been approved by the NC WPCSOCC to meet the regulatory requirements necessary to be eligible for the Wastewater Collection Grade I Certification Examination.

****Certificates of Attendance will be provided by mail upon successful completion of the required curriculum ****

LOCATION

Aqua NC – Denver Office
Denver Fire Dept
3956 Hwy 16 North
Denver, NC 28037

School Schedule

**Schools will be held
8:00 AM – 4:00 PM
On the following
days:**

September 3, 2010

September 10, 2010

September 17, 2010

Name: _____

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

System/Employer: _____

Address: _____

City: _____, NC Zip: _____

Phone: _____ Fax: _____

Cell: _____ Email: _____

Social Security #: _____

Circle Card Type: Visa MasterCard
Card #: _____

Expiration Date: _____

Complete Billing Address of Cardholder:
Address: _____

City: _____, St: _____

Zip: _____

I authorize NCRWA to charge \$ _____
to the credit card above.

Print name of cardholder: _____

Signature of cardholder: _____

Payment must be received in full prior to the first day of the school. Accepted forms of payment are check, money order, Visa or MasterCard.

*Return Registration form by mail to:
NCRWA, PO Box 540 Welcome, NC 27374,
by fax to (336) 731-8589 or by email to
ncrwass@aol.com.*

Should you have further billing or registration questions, please contact the NCRWA office at (336) 731-6963. Please contact Randy Welch at (919) 812-0668 with class related questions.