

Cross Connection Control Foundation
BACKFLOW SCHOOL REGISTRATION FORM

(Please fill, print and mail)

Company: _____ Business Phone: _____

Address: _____ City: _____

State: _____ Zip Code: _____ Business Email: _____

Student Name: _____ Phone: _____

Home Address: _____ City: _____

State: _____ Zip Code: _____ County of Residence: _____

Email: _____ NYS Cert# _____ Expiration Date: _____

(Recertification students Only)

CCCF Course/Testing Dates

Check One:	Initial Class \$595 (\$615 w/credit card)	Recertification \$195 (\$205 w/credit card)
	<input type="checkbox"/> March 26-29 NOW FULL	<input type="checkbox"/> March 23 NOW FULL
	<input type="checkbox"/> June 11-14 NOW FULL	<input type="checkbox"/> March 30 NOW FULL
	<input type="checkbox"/> Sept 17-20 NOW FULL	<input type="checkbox"/> June 8 NOW FULL
	<input type="checkbox"/> Dec 10-13	<input type="checkbox"/> June 15 NOW FULL
		<input type="checkbox"/> Sept 14 NOW FULL
		<input type="checkbox"/> Sept 21
		<input type="checkbox"/> Dec 7

Check One: Credit Card Check PO payable to:

Cross Connection Control Foundation \$ _____ to cover _____ registrations

If paying by credit card (Discover, Master Card, Visa, American Express) call Steve (585)216-2223

Please note that certificates will be issued 6-8 weeks after Course Completion. Please plan accordingly.

Mail to: CROSS CONNECTION CONTROL FOUNDATION 255 Basket Rd. Webster, NY 14580

Please print this form and mail with your registration fee. Travel and lodging information will be sent with a letter confirming your registration. Please supply a good email address above.