



MEMO

DATE: August 25, 2014
TO: Maintenance Provider Program Information
FROM: Lesley Desjardins
Operations Manager
SUBJECT: New Training Session Dates

Maintenance Provider

This training is conducted over a period of five days. The session will incorporate classroom as well as field and hands on experience opportunities. The training will focus the operation and maintenance required for conventional systems including trenches, beds, mounds and at-grades with some aerobic tank discussion. The second part concentrates more specifically on Aerobic Tanks, drip irrigation, single pass and re-circulating media filters. The final classroom component will focus on business practices for maintenance providers. A hands-on field session will follow the classroom training and an exam administered at the conclusion. This course is being offered in partnership with the National Association of Wastewater Technicians.

The next available training session dates are:

September 26 – 30, 2014 Courtenay, BC

If you are interested in participating in a training session listed, please complete the registration form which follows and fax it back. Space in the training sessions is limited and is allotted on a first come, first served basis. All course supplies will be distributed on the first day of training. **A minimum class of fifteen paid participants is required in order for the class to take place.**

Training fees must be received in our office prior to the course date. Cheques for training in British Columbia may be mailed to:

WCOWMA-BC
Box 342, 110-174 Wilson Street
Victoria, BC V9A 7N7

Visa and Mastercard are also accepted.

If you have questions please contact the WCOWMA office at 1.877.489.7471



Maintenance Provider Registration Form

September 26 – 30, 2014

Student Name: _____

Company: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Bus. Phone: _____ Fax: _____ Cell: _____

Email: _____

Are you currently a ROWP? Yes No

Do you have a ROWP designation (check off which one applies)

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Years of Experience: _____

Have you ever submitted a Filing? Yes No

Number of Filings Submitted? _____

Employment Background: _____

Onsite Related Training: _____

Highest Level of Education Completed: _____ Year of Birth: _____

Member Fees: **\$2550.00 Tuition**
 \$ 127.50 GST
 \$ 50.00 Certification Fee
 \$ 2727.50 TOTAL*

Non-Member Fees: **\$3550.00 Tuition**
 \$ 177.50 GST
 \$ 50.00 Certification Fee
 \$3779.75 TOTAL*

Payment Method: VISA
 MasterCard
 Cheque

Please mail cheques to: WcowMA-BC
 Box 342, 110 – 174 Wilson Street
 Victoria, BC
 V9A 7N7

Card Number: _____ Expiry Date: _____

Cardholder Name: _____

Signature: _____

Seats are reserved when fees are received. Cancellations will be accepted up to 7 days prior to start date, with a 10% administration fee deducted from refund. No refund will be made for cancellations with less than 7 days notice, however, a substitute person may be sent under your paid registration.

***Includes All Training Materials**