

WWW CORRESPONDENCE COURSE REGISTRATION FORM

Phone: 800-SAFE-811 (800-723-3811) Fax: 979-458-1426 Website: teex.org/cor

Address: TEEX-ITSI, P.O. Box 40006, College Station, TX 77842-4006

DO NOT EMAIL THIS FORM

For your security and ours, TEEX cannot accept personal information such as social security numbers or credit card information via email.

Fill Out Registration Form - (NOTE: If you are registering as an individual, ignore "Company" and "Title" below. Fill in your own Address and Contact information. If you are registering as part of any organization, then fill in "Company," "Title," and the Organization's Address and Contact information.)

- | | |
|----------------------------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> WWW400 - Basic Water Works Operations | <input type="checkbox"/> WWW451 - Wastewater Treatment |
| <input type="checkbox"/> WWW401 - Groundwater Production | <input type="checkbox"/> WWW452 - Wastewater Collection |
| <input type="checkbox"/> WWW450 - Basic Wastewater Operations | <input type="checkbox"/> WWW470 - Operación Básica del Agua Potable |

Participant's Name _____

TEEX Student ID** _____ TCEQ License # _____

Current Certification: Water _____ Wastewater _____

Company _____ Title _____

Address _____ City/State/ZIP _____

Phone _____ Fax _____

Email _____

Shipping Address _____

(Shipping by UPS Ground)

NOTE: Are you a water/wastewater worker licensed by the Texas Commission on Environmental Quality (TCEQ)?

If so, enter your TCEQ License # _____

NOTE: Are you licensed by the Texas Commission on Law Enforcement (TCOLE)?

If so, enter your PID # _____

*Section 7(b) of the Privacy Act of 1974 (5 U.S.C. 552a) requires that when any federal, state or local government agency requests an individual to disclose his or her social security account number (SSN), that individual also must be advised whether that disclosure is mandatory or voluntary, by what statutory or other authority the number is solicited and what uses will be made of it. Call 800-SAFE-811 (800-723-3811) for full privacy statement.)

** New students will receive a student ID number from TEEX.

NOTE: You MUST complete your course in SIX (6) MONTHS.

There are NO transfers to another course or student. There are NO refunds for a canceled correspondence course.

Payment Information - Advance registration is required. Payment must accompany registration.

Total Amount Due \$ _____

Arrange payment by one of the following methods:

- Check***/Money Order/Cashier's Check enclosed payable to TEEX - (Please add the course number, course name, and course date.)
- Purchase Order - Copy of official signed company PO must be attached. TEEX will send you an invoice.
- Credit Card

- MasterCard VISA American Express Discover PIN-less Debit Card

Name on Card: _____ Last 4 Digits of Card Number _____

Signature _____

ADMINISTRATION

FOR CUSTOMER SECURITY: REQUIRED INFORMATION BELOW WILL BE DESTROYED ONCE PAYMENT IS PROCESSED

ADMINISTRATION

CUT AND SHRED

CUT AND SHRED

Credit Card # _____ Expiration Date _____ (mm/yy)

***By sending your check, please be aware that you are authorizing the Texas A&M Engineering Extension Service (TEEX) to make a one-time electronic debit from your account at the financial institution on your check. This electronic debit will be for the amount of the check; no additional amount will be added to the amount and ALL transactions will remain secure. Please contact TEEX's Financial Services Department at 979-458-6906 to learn about other payment options if you prefer **NOT** to have your check used in this way. We value your business and appreciate your selecting TEEX for your training needs.

With few exceptions, you have the right to request, receive, review, and correct information about yourself collected using this form.