



Pool Operator Training

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Certified Pool/Spa Operator® Course Individual Registration Form

Instructions:

1. Please **PRINT** all information clearly.
2. **Home address is required** as the book and study materials are mailed there.
3. Per person fee: **\$325 for virtual (Zoom™) class**
4. Payment must be included if paying by check. Fill out the form below completely and mail this form with a check made payable to: **Pool Operator Training** to the address at the top of the form.
5. If paying by Purchase Order # you may e-mail this completed registration form and PO to **info@pooloptraining.com** or mail it to the address at the top of this form.
6. This Registration Form and either the check or PO must be received at least 14 days prior to class.
7. Registrations received after the deadline will be assessed an additional \$25 late registration fee.
8. If more than one person is registering, copy this form or call us for the Group Registration Form.

The virtual Zoom™ classes require each student have their own computer with access to the internet and with functioning camera, microphone and speaker. Zoom™ classes may require downloading the Zoom™ app onto the computer. Please be sure you have permission to do so prior to the day of the class.

Course Information (please print all information)

Course Location (City): Virtual Class via Zoom	State: Zoom
Course Dates:	, 20 _____

Company/Facility Information (All information is required. Please print.)

Company Name:		
Contact Name:	Title:	
Address:	Phone: () —	
City:	State:	Zip:
Contact E-mail:		

Student Information (All information is required. Please print.)

First Name:	MI:	Last Name
Home Address:		
Address 2:		
City:	State:	Zip:
Home Phone: () -	Cell Phone: () -	Certified Before? Y N
Required: E-Mail (Personal Email Preferred):		

Please copy for your records.