

REGISTRATION FORM

Please Fill out Second Sheet for Community College Purposes

**Custom Applicator Intensive Driver Training School - February 21 & 22, 2012
Initial Commercial Pesticide Review and Testing or Re-certification - February 23, 2012**

COMPANY NAME: _____
 MAILING ADDRESS: _____
 CITY/STATE/ZIP: _____
 PHONE NUMBER: _____

PLEASE FILL IN NAME(S) & CHECK OPTION(S) FOR EACH REGISTRANT

NAME	ATTENDANCE OPTIONS	FEES	TOTAL AMT DUE
(1) Name _____	<input type="checkbox"/> Custom Applicator School - Tuesday & Wednesday, February 21 & 22, 2012 <input type="checkbox"/> Commercial Pesticide First Time Testing Thursday, February 23, 2012 Pesticide Testing Study Manuals (Optional, but highly recommended) <input type="checkbox"/> Commercial Pesticide Re-Cert. OR Re-Test (Includes Lunch), February 23, 2012	\$230/Member \$300/Non-Member \$70/Member \$100/Non-Member Visit: www.pested.unl.edu Or Call 800/627-7216 \$50/Member \$85/Non-Member	\$ _____ \$ _____ \$ _____
(2) Name _____	<input type="checkbox"/> Custom Applicator School - Tuesday & Wednesday, February 21 & 22, 2012 <input type="checkbox"/> Commercial Pesticide First Time Testing Thursday, February 23, 2012 Pesticide Testing Study Manuals (Optional, but highly recommended) <input type="checkbox"/> Commercial Pesticide Re-Cert. OR Re-Test (Includes Lunch), February 23, 2012	\$230/Member \$300/Non-Member \$70/Member \$100/Non-Member Visit: www.pested.unl.edu Or Call 800/627-7216 \$50/Member \$85/Non-Member	\$ _____ \$ _____ \$ _____
(3) Name _____	<input type="checkbox"/> Custom Applicator School - Tuesday & Wednesday, February 21 & 22, 2012 <input type="checkbox"/> Commercial Pesticide First Time Testing Thursday, February 23, 2012 Pesticide Testing Study Manuals (Optional, but highly recommended) <input type="checkbox"/> Commercial Pesticide Re-Cert. OR Re-Test (Includes Lunch), February 23, 2012	\$230/Member \$300/Non-Member \$70/Member \$100/Non-Member Visit: www.pested.unl.edu Or Call 800/627-7216 \$50/Member \$85/Non-Member	\$ _____ \$ _____ \$ _____

Total Registration Fees For All Registrants \$ _____
5% Cash Discount if Payment is Being Made By February 10, 2012 \$ _____
 (Excludes Credit Cards)

TOTAL AMOUNT ENCLOSED \$ _____

CREDIT CARD INFORMATION: Card Type: _____ Expiration Date: _____
 Signature On Card: _____
 Card Number: _____
 E-mail (required for receipt) _____

A 5% administrative fee added to all credit card transactions. Charges will appear under the name of "Trade Assn. Mgmt".

**Make Checks Payable To: Nebraska Agri-Business Association, Inc.
 Return To: Bob Anderson
 Nebraska Agri-Business Association, Inc.
 1335 H Street, Suite 100
 Lincoln, NE 68508-3784; Phone: 402/476-1528, Fax: 402/476-1259**