

2008 Termite Technician Schools Registration Form
Clemson Institute for Community and Economic Development
Sandhill Research and Education Center
Columbia, SC

Please print neatly

Participant's Name: _____

(Please give name as you want it to appear on the certificate. Feel free to duplicate this form.)

Nametag Name: _____

(If different from above)

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone #: (____) _____ Fax #: (____) _____

SC Pesticide License No. _____

Please enroll the above-named participant in:

SCPCA MEMBERS

_____ **Apprentice Termite Technician School XXXI**, *August 4-5, 2008*; \$150

_____ **Apprentice Termite Technician School XXXII**, *August 6-7, 2008*; \$150

_____ **Master Termite Technician School XLI**, *October 16-17, 2008*; \$200

_____ **Master Termite Technician School XLII**, *November 6-7, 2008*; \$200

NON-MEMBERS

_____ **Apprentice Termite Technician School XXXI**, *August 4-5, 2008*; \$225

_____ **Apprentice Termite Technician School XXXII**, *August 6-7, 2008*; \$225

_____ **Master Termite Technician School XLI**, *October 16-17, 2008*; \$275

_____ **Master Termite Technician School XLII**, *November 6-7, 2008*; \$275

Payment Methods

Check enclosed for \$_____. Make check payable to SCPCA.

Please charge my VISA Mastercard Amount \$_____

Card number _____

_____ Exp. Date _____

Cardholder Signature

Mail to:

SCPCA
P. O. Box 24768
Columbia, SC 29224

If you have questions or need further assistance, call Jackie Ellis at 864/656-5048.