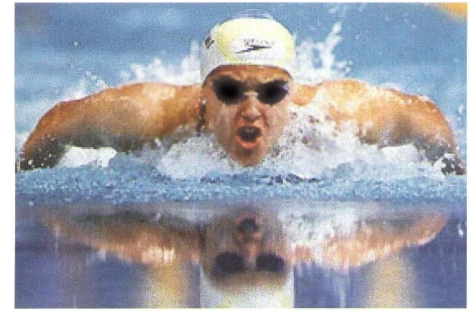




P.O. Box 433, Manchester WA 98353
Tel: (360) 769-2530 Fax: (360) 871-6871
Email: admin@tmisaltpure.com



Certified Pool Operator® Training Course

*Is your pool operating at its peak?
Is your pool operating safely?
Do you want to be sure?*

**Now is the time to have a CPO®
at your site**

State health codes specify that "Every pool shall be under the supervision of a person who is fully capable of and shall assume responsibility for, compliance with all the requirements relating to pool operation, maintenance and safety of bathers."

The **Certified Pool Operator®** course through the **National Swimming Pool Foundation** is a nationally recognized-training program for the commercial pool or spa operator. Successful completion of this two-day course gets the professional pool operator a five-year certification and permanent registration number. This certification demonstrates the pool operator understands how to safely operate and maintain the pool/spa at maximum efficiency.

Books and tests are available in other languages besides English if needed. Books are also available in Spanish, French and Russian. (Anybody needing a Russian book will need to be registered at least 6 weeks prior to the class date.) Tests are also available in Russian, Greek, Spanish, Chinese and French.

This two-day course benefits pool operators, supervisors, aquatic managers and directors alike. It includes all course materials, handouts, certification fees, and lunch for both days.

The fee is **\$380.80**.

(fee includes Tax - 8.8%).

Get the most from your pool or spa! Be safe; be clean; be efficient!

We accept Visa/MC. Call Cathy with questions, or to book, at 360-769-2530. **All attendees must prepay.**

TMI CPO Course:

May 2nd and 3rd, 2018

8:00 AM - 5:30 PM Both Days

LOCATION:

Shilo Inn

707 Ocean Shores Boulevard NW

Ocean Shores, WA 98569

INSTRUCTOR:

Cathy Erntson

email: CPO@tmisaltpure.com



CPO® REGISTRATION FORM

Please fill out this side of the form for class attendees

**Fax this application with Credit card details to: (360) 871-6871, email: CPO@tmisaltpure.com
or mail completed application with check to: TMI, P.O. Box 433, Manchester WA 98353**

Please bring your own calculator, pencil and notebook paper.

COMPANY NAME: _____ Admin Contact Person: _____

Admin Address: _____

City: _____ State: _____ Zip: _____

E-Mail: _____ Phone Number: _____ Fax: _____

Class Attendee 1 \$380.80 Veg Non Veg

Attendee Name: _____ Address: _____

City: _____ State: _____ Zip: _____

E-Mail: _____ Phone Number: _____ Position: _____

Additional Person #2 \$380.80 Veg Non Veg

Attendee Name: _____ Address: _____

City: _____ State: _____ Zip: _____

E-Mail: _____ Phone Number: _____ Position: _____

Additional Person #3 \$380.80 Veg Non Veg

Attendee Name: _____ Address: _____

City: _____ State: _____ Zip: _____

E-Mail: _____ Phone Number: _____ Position:

CUSTOMER PAYMENT INFORMATION

CREDIT CARD Credit Card #: Visa M/C Amex

Expiration Date MO _____ Year _____ 3 Digit Code _____ Total :

Billing Address: Street: _____

***for credit card**

City: _____ State: _____ Zip: _____

Check in Mail: (please mark if Check will be mailed.) Amount Enclosed _____ # of people _____