### PART I. – REGISTRANT(S) (PLEASE PRINT LEGIBLY)

Name(s) __________________________________________
__________________________________________________
__________________________________________________

Company __________________________________________
E-Mail for Rec’t ____________________________________
Company Phone __________________ City __________ State ________ Zip ________

### PART II. SPECIAL TRAINING DATE: __________________________

### PART III: LOCATIONS

<table>
<thead>
<tr>
<th>Location</th>
<th>Address</th>
<th>Room</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chattanooga – Hamilton Co. Extension Office, 6183 Adamson Circle</td>
<td>UT Pesticide Safety Education Program (PSEP) Office, 2505 E.J. Chapman Drive, 370 PBB, Knoxville, TN 37996-4560</td>
<td></td>
</tr>
<tr>
<td>Murfreesboro – Rutherford Co. Ext. Ofc 315 John R. Rice Blvd., Room</td>
<td>Other – ____________________________</td>
<td></td>
</tr>
<tr>
<td>Jackson – West TN Regional Office, UT West TN Center, 605 Airways Blvd., Room</td>
<td>Murfreesboro – Rutherford Co. Ext. Ofc 315 John R. Rice Blvd., Room</td>
<td></td>
</tr>
<tr>
<td>Knoxville – UT Ag Campus, Plant Biotech Bldg., 2505 EJ Chapman Dr., Room</td>
<td>Murfreesboro – Rutherford Co. Ext. Ofc 315 John R. Rice Blvd., Room</td>
<td></td>
</tr>
</tbody>
</table>

### PART IV: TRAINING FEES

- **ATTENDING FOR POINTS? Check this box.**
  - Category 7 + Core, Household & Structural Pests (in prep for C7 exam)
    - 6 points in C7, C10 & C12 for those who are already certified
  - Category 3 + Core, Ornamental & Turf Pests (in prep for C3 exam)
    - 6 points in C3, LHA, C10 & C12 and 5 points in C6 for those already certified
  - Category 6 + Core, Right of Way (in prep for C6 exam)
    - 5 points in C6, C10 & C12 for those who are already certified
  - Other

- **ATTENDING FOR TESTING? Check this box.**
  - Number attending: ___
  - Fee: $___
  - TOTAL: $___

  - 8:00 a.m. (CT or ET) $$___ X ___ = $___
  - BRING LUNCH

  - 8:00 a.m. (CT or ET) $$___ X ___ = $___
  - BRING LUNCH

  - 8:00 a.m. (CT or ET) $$___ X ___ = $___
  - BRING LUNCH

**Prepay ** ___
**Pay on Site ** ___
Date paid: ____________
TOTAL ________

** The prepay option is only available for Knoxville sessions. NO REFUNDS will be given for nonattendance without 48-hour advance notice.

### PART V. – PAYMENT OPTIONS (Prepay only):

- Phone 865-974-1286 or Fax 865-974-8868
- Mail form and check or money order, made payable to the University of TN, to:
  - UT Pesticide Safety Education Program (PSEP) 2505 E.J. Chapman Drive, 370 PBB
  - Knoxville, TN 37996-4560

- Discover, MC, AmEx or Visa Auth. # ____________
- Cash (exact amount) Rec’t UTIA_______ RENPP_______
- Check or money order # _________ Date ____________
- Rec’t UTIA_______ RENPP_______

Credit card number ____________________
Expiration date ____________
Card verification # ____________

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Programs in agriculture and natural resources, 4-H youth development, family and consumer sciences, and resource development.
University of Tennessee Institute of Agriculture, U.S. Department of Agriculture and county governments cooperating.
UT Extension provides equal opportunities in programs and employment.