HASTINGS ON HUDSON RECREATION IS PLEASED TO HOST THE NEXT



POOL SCHOOL TRAINING





(aka: NSPF® CPO® COURSE)



THIS IS A NATIONAL CERTIFICATION COURSE SPONSORED BY THE NATIONAL SWIMMING POOL FOUNDATION - VALID FOR 5 YEARS

DATES: April 23-24, 2018 TIME: 8:15 am – 4:15pm

**NOTE: This is a 2-day course. Attendance is mandatory on both days!

INSTRUCTOR: Bob Richards will be the certified CPO® Instructor from **Pool and Spa Rx**, Ballston Lake, New York

COST: Price includes course materials, certification, a morning refreshment.

EARLY REGISTRATION -APPLICATION AND PAYMENT MUST BE RECEIVED BY APRIL 5, 2018

By check - \$299.00 per person - By credit card. \$309 per person By Purchase order \$325 per person.

Re-Cert Price-Application by Check: \$285 — **Re-Cert Credit Card Price**: \$295.00

Re-Cert Purchase Order Price: \$315 *Special pricing expires APRIL 5, 2018

***** AFTER APRIL 5, 2018 - NORMAL COURSE PRICING WILL BE CHARGED TO ALL: \$325 per person

Payment required prior to training.

REGISTRATION: Must be mailed/faxed/emailed to Pool and Spa Rx. All registrations will be accepted on a first come first served

basis. Application is attached to this email or is available @ www.poolandsparx.com – **Questions:** Contact----- Pool & Spa Rx - Telephone: 518-899-1117 or 518-441-4782

HASTINGS CONTACT:

○ Nicole Higgins — Hastings Recreation Telephone: (914) 478-2380 Email: nhiggins@hastingsgov.org

LOCATION & DIRECTIONS: Training will be <u>James V. Harmon Community Center</u>, 44 Main Street, Hastings on Hudson, NY 10706

Contact: Nicole if you have any LOCATION QUESTIONS - PHONE: (914) 478-2380

CPO® Registration Form—Please include: Check, Money Order, or Copy of Purchase Order-Registration required to attend.

Pool & Spa Rx 18 Hills Road, Ballston Lake, NY 12019 TELEPHONE- 518-441-4782 OR 518-899-1117

Required- for full registration Email- poolandsparx@gmail.com

Location: James V. Harmon Community Center, 44 Main Street, Hastings on Hudson, NY 10706
First Name
*E-Mail:
*Business Fax:
YesNo If Yes when? MONTH YEAR CERTIFICATION #
ax: (e-mail)
ust be included or PO #. Check# PO# Credit card <u>COMPLETE BELOW</u>
include your Card #, Exp. Date, & Security Code (Sec. Code) for processing. Charge your account. CIRCLE ONE: MASTERCARD VISA DISCOVER
Expiration Date: Month Year 20 Sec Code
JR E-MAIL ADDRESS: PLEASE PRINT CLEARLY
Signature:
s and participation. Registrations are accepted in the order which they are received. Once submission of application is mailed registration is considered confirmed. Submission of mission of your application is considered binding and all course fee is non-refundable unless cancellation REQUEST is made by you in writing, 3 weeks prior to the first day of the exed, or e-mailed to Pool & Spa Rx. Illity of the Instructor registration fee, the late fee will be required to be paid prior to or at class. Cancellation and refund policy. If a class is cancelled by our organization, you will be given the option QUEST is made by you in writing, 3 weeks prior to the first day of the course, the registration fee less a \$60 processing fee will be refunded upon return of any unused course.
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Fax: 518-899-5859