

WISCONSIN BETTER PROCESS CONTROL SCHOOL REGISTRATION FORM

UNIVERSITY OF WISCONSIN-MADISON
BETTER PROCESS CONTROL SCHOOL
Session 49• April 23-26, 2018



WISCONSIN
UNIVERSITY OF WISCONSIN-MADISON

RETURN FORM AND FEE TO:

Extension Conference Services
University of Wisconsin
702 Langdon Street
Madison, WI 53706

Register online: foodsafety.wisc.edu

Please print clearly or type

Participant Name _____

Company Name _____

Company Address _____

Participant Home Address _____

City/State/Zip _____

Phone/Email _____

Manual may be mailed to a corporate address. Grade Report and Certificate must be mailed to a home address. Please list both company address and participant home address.

Language for manual: English Spanish

Language for exams: English Spanish

- REGISTRATION FEE:** Early Registration - \$725 (includes manual); \$625 group discount (includes manual)
 Late Registration (after April 9) - \$900 (includes manual)

Advance registration and prepayment required. Enclose fee and make check or money order payable to UW-Extension. When registration form and payment are received, UW-Extension will send a confirmation letter, manual, and school information directly to the address listed on this enrollment form.

The instructional manual for this course is "Canned Foods: Principles of Thermal Process Control, Acidification and Container Closure Evaluation" (8th edition). All students are required to read the manual before attending the School.

Substitutions may be made **up to one week prior to the start of the school**; please advise Conference Services by calling (608) 262-2451. To avoid a fee, substitute participant must be given the school manual (if already received).

To cancel, notify Extension Conference Services at (608) 262-2451. Refunds, less a \$150 processing fee, will be offered up through the early registration deadline, April 9. No refunds will be given for cancellations received after April 9. If the school is canceled due to insufficient enrollment or unforeseen circumstances, the full fee will be refunded. **PAYMENT:** Payment may be received via fax form, mail or on-line. **DO NOT** attempt to email credit card information. All payments are to be submitted to Extension Conference Services at the address listed above.

- Check or Money Order Enclosed (*payable to UW-Extension*)
- Credit Card Payment. *Please provide complete information below:*

Please charge to the following account:

Visa Mastercard AMEX Discover

Expiration Date _____

Credit Card # _____

Name on Card _____

Signature _____

Meals (circle those needed)	Monday, April 23	Tuesday, April 24	Wednesday, April 25	Thursday, April 26
	Lunch	Breakfast	Breakfast	Breakfast
Dietary Preference:		Lunch	Lunch	

Note: You may copy this form for additional people. Please submit one form per person.