



Association of Montana Turf, Ornamental & Pest Professionals

Landscape Irrigation Technician Class

Wednesday, January 22, 2020 - 8 AM to 5: PM
Fairmont Hot Springs Resort

1500 Fairmont Road, Fairmont, MT

For Room Reservations Call: 1-800-332-3272

REFERENCE: AMTOPP CONFERENCE FOR GROUP RATE PRIOR TO 1-06-2020

******* Registration Deadline Is November 1, 2019 *******

Company Name: (as it should appear on badge) _____

Name (1st attendee): _____

Contact name (if different from 1st attendee): _____

Address: _____ City: _____ State: _____ Zip: _____

Cell: _____ Phone: _____ Fax: (_____) _____

Email address: _____ Website: _____

Please list additional names of attendees

2) _____ 3) _____ 4) _____

5) _____ 6) _____ 7) _____

Membership	Cost	Membership Total	
Regular-holds a pesticide license-voting	\$115		
Associate - no pesticide license-non voting	\$50		
Not Interested in Membership	0		0
Registration	Cost	No. of Attendees	Registration Total
Landscape Irrigation Technician Class ONLY (Wed Jan 22 only)	\$250 per person <small>includes continental breakfast, lunch and a manual</small>		\$
Class plus Conference (Wed-Friday) - note you MUST sign up as a Regular or Associate Member to take advantage of this offer	\$330 per person <small>plus cost of Regular or Associate Membership (1 membership covers all employees for that company)</small>		
TOTAL	Check or Credit Card		\$

_____ (initial if paying membership) I agree to abide by the Association of Montana Turf, Ornamental, and Pest Professionals (AMTOPP) By Laws and any other reasonable codes or standards established by AMTOPP. (See website: www.amtopp.org for By-Laws (under Membership) or contact the AMTOPP office (406) 204-0100 or amtopp@amtopp.org)

Credit Card Info: Visa/MC/Discovery Card Number: _____ -- _____ -- _____ Exp: Date: _____

Security Code: _____ Name on Card: _____

Billing Address: _____ City: _____ ST: _____ Zip: _____

OR CALL THE OFFICE WITH THIS INFORMATION (406) 204-0100

Signature _____ Date _____

Please make checks payable to AMTOPP. Mail completed form with check to: AMTOPP, 173 Cottonwood Rd., Townsend, MT 59644-9533. You may pay with a credit card through PayPal on the website: www.amtopp.org.

NO REFUNDS AFTER December 1, 2019.

For AMTOPP Office use: Date Paid _____ Check # _____ /C.C. _____ Added to Conf. Registration: _____ Name Badges: _____ Comments: _____
