

# BACKFLOW TESTER RENEWAL COURSE

(OESAC Approved #2948: 0.6 water relevant CEUs) Oregon Health Authority Approved

## PREREGISTRATION IS REQUIRED!!

COURSE: XWET C002-12 Tester Renewal (0.6 CEUs)  
 DATE: NOVEMBER 3, 2017  
 TIME: 8:00 am – 4:00 pm  
 LOCATION: Clackamas Community College  
 Oregon City, Oregon  
 Training Center, Room T-150

ATTENTION!! To avoid a \$15 billing charge please MAKE SURE THAT THIS FORM DOES NOT BECOME SEPARATED FROM YOUR PAYMENT.  
Thank you!

COST: \$85.00 -- **Please Note: There is a \$15 service charge for purchase orders.**  
 (REFUND POLICY: A full refund will be granted for all withdrawals requested for a class scheduled to meet one week or less if the refund is requested **PRIOR** to the beginning of the class.)

To pay by check or purchase order make payable to:  
**Clackamas Community College - (attach form below with check or Purchase Order)**  
 Attn: Registrar ~ 19600 S. Molalla Avenue ~ Oregon City, OR 97045

**To register online with credit card:**

1. Go to:  
<https://webadvise.clackamas.edu/WA32PROD/WebAdvisor?TOKENIDX=5463356084&type=M&constituency=WBCE&pid=COR E-WBCE>
2. Click on **Search for Classes/Workshops**
3. At **Course Code Number** (example, **SBM-008-05**) type **XWET**
4. Select the class by click the check box next to the course number
5. Click the **SUBMIT** button at the bottom of page
6. Complete registration (requires credit or debit card payment)

*If you have any issues with this process please contact Naomi at 503-594-3345.*



## QUICK ENTRY REGISTRATION

Term: FALL 2017

Birthdate (**REQUIRED**) Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_ Today's Date \_\_\_\_\_

Name \_\_\_\_\_  
Last
First
Middle

Mailing address \_\_\_\_\_  
Street
City
State
County
ZIP

Telephone \_\_\_\_\_  
Home
Cell
Work

CRS. Reg #	SECTION NO.	COURSE TITLE	CREDITS/ CEU	TIME								ROOM	START DATE	CRS. FEE
					M	T	W	TH	F	S	S			
277603	XWET- C002-12	1 DAY TESTER RENEWAL	0.6	8AM - 350 PM							X	T150	11/3	\$85