

WE ARE COMMITTED TO PROVIDING
OUR OPERATORS TRAINING THAT
PREPARED THEM TO BE THE WATER
LEADERS OF TOMORROW

AWWAO 23rd AGM, TRAINING & TRADESHOW CONFERENCE



CONFERENCE REGISTRATION FORM

ABORIGINAL WATER AND WASTEWATER ASSOCIATION OF ONTARIO
41 C DUKE STREET, BOX 340
DRYDEN, ON. P8N 2Z1

Sponsored by:



Health
Canada

Santé
Canada



Indigenous and
Northern Affairs Canada

Affaires autochtones
et du Nord Canada

Name _____ Operator ID# _____
 First Nation/Organization _____
 Address _____
 City, Province & Postal Code _____
 Phone # _____ Cell# _____
 Email _____

AWWAO will be running a 3 day conference. Please choose the modules that you would prefer to participate in. AWWAO will attempt to ensure that you are scheduled in the modules you have indicated you prefer. However, all requests will be on a **first come/first served** basis. Requests will be processed when your registration has been received.

Scan and email to info@awwao.org or fax your completed form to (807) 223-2572

Courses	Rank (1 st to 7 th choice)
NEW-Mandatory Renewal Course	
Advanced Groundwater Systems	
Iron and Manganese Control Strategies	
Safety in the workplace	
Nutrient Removal Systems Using Simulator Model	
NEW-The Distribution System: Protect your Water from Source to Tap	
Lock Out/Tag out & WHMIS	

Your itinerary will be available at the Registration Table on February 26th & 27th, 2018

******Please note:** Attendance requests from your First Nation will be honoured. Attendance will be taken daily and CEUs will be awarded accordingly. 100% participation is mandatory and expected by our funding agencies. These courses require a minimum of 5 participants to run.

IMPORTANT: THIS FORM MUST BE COMPLETED AND SUBMITTED TO AWWAO BY NO LATER THAN JANUARY 26, 2018!

***Sign up to be an AWWAO member now. Annual fee is \$200**

ACCOMMODATIONS

Date of Arrival: _____
 Date of Departure: _____
 Room Requirements: Single or Double _____
 Dietary Requirements: No or Yes, please list _____
 Accessibility Requirements: No or Yes, please list _____

ATTENTION:
FIRST NATION DELEGATES!!!
WATER TASTE CHALLENGE
FEBRUARY 27, 2018



Please complete and enclose with your conference registration form.

YES! First Nation _____ will bring a clearly labeled one gallon container (4 litres) of drinking water as well as a copy of our most recent weekly analytical results for Chlorine, Residual, Turbidity, Colour and pH.

- 💧 **Water will be judged on:**
- 💧 **Taste**
- 💧 **Colour**
- 💧 **Odor**
- 💧 **Overall Refreshing Quality**

Please leave your container at the Registration Desk

HOSTED BY:



The AWWAO is sponsoring accommodations and meals!!

VENUE:

The 23rd AGM & Training Conference will be held at the Chelsea Hotel, Toronto
33 Gerrard Street West, Toronto, Ontario



ACCOMMODATION:

To guarantee your room at the Chelsea Hotel, please submit your Membership and Conference Registration Forms by **January 26, 2018**. A rooming list will be maintained by the AWWAO Coordinator, your registration will place your name on the rooming list. Individuals are required to provide a valid credit card or a deposit of \$200 for security purposes (security deposit) plus \$50 per night at the time of check-in to cover any anticipated incidental charges. If your deposit is used for in room charges a further \$50 per night will be requested.

SPONSORED MEALS

AWWAO provides breakfast, lunch and dinner on training days. Meals for travel days are the responsibility of the Operator.

WAIVER

Any individual joining in, participating in, or experiencing the AWWAO 23rd Annual Training Conference event does so at their own risk and hereby now and forever releases AWWAO from any and all claims, actions, lawsuits and/or demands that individual or others may hereafter have against AWWAO, or its successors or assigns, arising out of or in connection with any loss or injuries sustained. Any individual joining in, participating in or experiencing the AWWAO 23rd Annual Training Conference event hereby now and forever waives all rights of subrogation against AWWAO.

I hereby authorize AWWAO to publish photographs taken of me at the conference, and my name and likeness, for use in the AWWAO's print, online and video-based marketing materials, as well as other AWWAO publications. I hereby release and hold harmless AWWAO from any reasonable expectation of privacy or confidentiality associated with the images specified above. I further acknowledge that my participation is voluntary and that I will not receive any financial compensation for any specified images. I hereby release AWWAO, its contractors, employees, and any third parties involved in the creation or publication of marketing materials, from liability for any claims by me or any third party in connection with my participation.

Signature _____

Date _____

AWWAO MEMBERSHIP FORM

Place a checkmark next to the membership you would like to join!!

<input checked="" type="checkbox"/>	Memberships	
<input type="checkbox"/>	Regular Member/Licensed Operator	\$200.00
<input type="checkbox"/>	Associate	\$400.00
<input type="checkbox"/>	Corporate/Business	\$500.00/3, \$800.00/5, \$1200.00/10

Total Enclosed: \$ _____

Organization/First Nation: _____

Name: _____

Address: _____

City: _____ Prov.: _____ Postal Code: _____

Home: _____ Cell: _____

Work: _____ Fax: _____

Email: _____

Current Certificate/License Level: _____

Please make cheques payable to AWWAO. Credit cards are not accepted.

Thanks for your support!

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