



MSO provides continuing education opportunities to Missouri onsite wastewater professionals. Register early to save your seat! Contact our office with any questions. Phone: 417-631-4027

**Wastewater Pathogen Class + Excavation Safety**

**Location: Springfield, SI Precast**

**Date: December 8, 2022**

Half day class: 8:30 AM—2:00 PM

Lunch included

DHSS General CEUs: 4

Select: Basic: 2, Advanced: 2, Inspector: 0, OSE: 0, Perc Tester: 0

\_\_\_\_\_ Member price: \$60

\_\_\_\_\_ Non-member price: \$200 (includes MSO Membership)

This class is a special speaker class with John Thomas from WOSSA. Don't miss this great opportunity to hear a new speaker about topics in our industry.

Please note: This course takes place on a second floor meeting room that requires you to travel up 2 flights of stairs. There is no elevator. If this is a problem for you to attend, please contact MSO.

**Please send registration form and payment to MSO at  
least 2 weeks prior to your class!**

**Seminar Registration Guidelines (see complete guidelines on website):**

- Registrant is required to notify the Executive Director as early as possible of a cancellation
- Refund policy as follows (full refund policy available online):
  - Cancellation received more than 7 days prior to seminar, full refund
  - Cancellation received between 2-7 days prior to seminar, 50% refund
  - Cancellation received less than 2 days prior to seminar, Registrant forfeits class fee

## Registration Form

Yes! Sign me up for membership with MSO!

\_\_\_\_\_ Individual Membership at \$140

If you would like a Company Membership for 4 or more employees, please contact our office.

**Name:** \_\_\_\_\_

**Company:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**County:** \_\_\_\_\_

**Email address:** \_\_\_\_\_

**Check here if you want to be signed up for email updates on classes:** \_\_\_\_\_

I would prefer the quarterly newsletter by: \_\_\_email or \_\_\_mail

Phone number: \_\_\_\_\_ Cell number: \_\_\_\_\_

**DHSS License Numbers:**

Basic Installer: \_\_\_\_\_ Advanced Installer: \_\_\_\_\_

Inspector: \_\_\_\_\_ Onsite Soil Evaluator: \_\_\_\_\_ Perc. Tester: \_\_\_\_\_

DNR WW Operator: \_\_\_\_\_

**Pay online! [mosmallflows.org](http://mosmallflows.org)**

**Send form and payment to:**

Missouri Smallflows Organization

2733 E Battlefield #132

Springfield, MO 65804

Phone: (417) 631-4027

Email:  
[contact@mosmallflows.org](mailto:contact@mosmallflows.org)

\_\_\_ Check here if card billing address same as above

We do not accept American Express.

Card #: \_\_\_\_\_

Exp: \_\_\_/\_\_\_ CVV: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Card Billing Street Address: \_\_\_\_\_

\_\_\_\_\_

**Card Billing ZIP code:** \_\_\_\_\_