



# 2021 EDUCATION SESSION #1

VIA ZOOM  
NOVEMBER 10, 2021

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PESTICIDE COMPLIANCE PROGRAM | HEALTH CANADA

## DELEGATE INFORMATION

	First Name	Last Name	Email Address (to receive credit, each attendee must be registered with a unique email address)
1.			
2.			
3.			
4.			
Company Name			
Email Address		Phone Number	

## REGISTRATION FEES

Please indicate the number of delegates attending in the spaces provided below.

	Member Fee	#	Non-Member Fee	#
Registration	\$ 50		\$ 100	
Subtotal			\$	
GST (BIN # R125292276)			\$	
Total			\$	

Your registration includes your credit for a one hour session.  
Registrations cannot be processed without payment.

## PAYMENT INFORMATION

Payment Type	Payment Details		
<input type="checkbox"/> Credit Card	Credit Card/Cheque #		Expiry Date (MM/YY)
<input type="checkbox"/> Cheque	Cardholder Name		CSV #

Please make cheque payable to Alberta Aerial Applicators Association and return completed registration form and payment to the AAAA office:

**By Email:** [info@albertaaerialapplicators.com](mailto:info@albertaaerialapplicators.com)  
**By Fax:** (780) 413-0076  
**By Mail:** AAAA, 202, 5405 99 St NW, Edmonton, AB T6E 3N8

Should you have any questions or concerns please do not hesitate to contact the office.