



2021 FWQA VIRTUAL FALL EDUCATION SEMINAR REGISTRATION FORM
8:00 am on November 2, 4, 9 and 12, 2021
Send in your registration today...

Company Name _____

Attendee Names _____ email _____

_____ email _____

_____ email _____

Mailing Address _____

City ,State, Zip Code _____

E-Mail Address _____ (for confirmation)

TOTAL DUE FOR ALL FOUR SEMINARS – THE 2021 SERIES
FWQA Member Rate

1 employee	\$50	\$ _____
2-5 employees	\$45 each	\$ _____
6 or more employees	\$35 each	\$ _____
FWQA Membership	\$150 per year	\$ _____

Non member rate \$75 each \$ _____

Payment by CHECK _____, Mastercard _____ VISA _____ DISCOVER _____ AMEX _____

Checks made out to FWQA and mailed to FWQA, P O BOX 2531, Lakeland, FL 33806
or fax to 866-845-4988 or go to www.fwqa.com and register on line.

If you have any questions call 863-644-6622 or 863-698-0611, or email suzanne@fwqa.com.

Credit Card # _____ Exp. Date _____ 3-digit code _____

Names as it appears on Credit Card _____
(MASTERCARD, VISA, AMEX OR DISCOVER)

Address for the Credit Card _____

Signature _____