



Cleaning Training Course Series

PDA Training and Research Institute
4350 East West Highway, Suite 110, Bethesda, MD 20814

REGISTER NOW

Online: pda.org/2019CleaningTCS
Fax: +1 (301) 986-1093 (USA)

Questions? Call registration at
+1 (301) 656-5900 ext. 115

1 Contact Information PDA Membership Number

Check here to become a member and receive the member price for this event. (add \$279 to your total)

Prefix _____ Name (Last, First, MI) _____

Job Title _____ Company _____

Business Address _____

City _____ State/Province _____ ZIP+4/Postal Code _____

Country _____ Email _____

Business Phone _____ Fax _____

Substituting for

(Check only if you are substituting for a previously enrolled colleague; The fee difference in the prevailing rate is due at the time of substitution. Please note that if you are a non-member substituting for a member, you will be required to pay the difference in the non-member fee.)

2 Please check appropriate fee (US\$).

	Price on or before Sept. 13, 2019		Price after Sept. 13, 2019		Government/Health Authority/Academic
	Member	Non-member	Member	Non-member	Member/Non-member*
PDA #537 Addressing Biofilm and Other Non-Routine Microbial Events October 28, 2019 Cancellation Date: September 28, 2019	<input type="radio"/> \$ 1,259	<input type="radio"/> \$ 1,511	<input type="radio"/> \$ 1,399	<input type="radio"/> \$ 1,679	<input type="radio"/> \$ 839
PDA #594 Shutdown Recovery and Disinfectant Effectiveness Studies for Controlled Environments October 29, 2019 Cancellation Date: September 28, 2019	<input type="radio"/> \$ 1,259	<input type="radio"/> \$ 1,511	<input type="radio"/> \$ 1,399	<input type="radio"/> \$ 1,679	<input type="radio"/> \$ 839

* For this member type or discounted rate, online registration is not available and must be faxed in.

3 Payment Options All cards are charged in US\$.

By Credit Card – Clearly indicate account number, expiration date, and billing address. Please bill my: American Express MasterCard VISA Credit Card Guarantee Only

Total amount \$ _____

Account Number _____ Exp. Date _____

Name (exactly as it appears on card) _____ Signature _____

Billing Address (must match credit card statement) _____

City _____ State _____ Zip _____

Country _____ Wire Transfer Payments: If you require wire transfer, please contact registration@pda.org.

PDA Federal Tax I.D. #52-1906152

Your consent is important. We manage your personal data responsibly.

RESPONSE REQUIRED – By checking the box(es) below, I consent to:

- My contact information (name, company, job title, city, state, country) being printed on the attendee list distributed at the event.
- PDA recording and/or photographing me and using those recordings and/or photographs in future PDA promotional and marketing materials.
- PDA sending me promotional information via email.
- PDA sending me promotional information via post.

For more information on PDA's
Privacy and Event Privacy Policies,
please visit pda.org/privacy-policy
and pda.org/event-privacy-notice.

GENERAL TERMS AND CONDITIONS: PDA will send you a confirmation letter within one week of payment being received. You must have this confirmation letter to be considered enrolled in a PDA event. If you have submitted a purchase order or requested an invoice, please be advised that a credit card guarantee is needed. PDA reserves the right to modify the material or speakers/trainers without notice or to cancel an event. If an event is cancelled, registrants will be notified by PDA as soon as possible and will receive a full refund. PDA will not be responsible for any costs incurred by registrants due to cancellation. Please note that the attendee list is shared with attendees and exhibitors and may be used to follow up on specific areas of interest after the event. Tape recordings are prohibited at all PDA events. For more information, contact registration@pda.org or +1 (301) 656-5900. **SUBSTITUTION:** If a substitution request is sent 30 days before the event, no fee will be charged. After this period, a \$200 fee will be charged. If you are a non-member substituting for a member, you will be required to pay the difference of the non-member fee. **REFUND:** If a refund request is sent 30 days before the event, a full refund will be given minus a \$200 fee. After this period, no refunds will be given. Refund requests must either be faxed to +1 (301) 986-1093 or emailed to registration@pda.org. Phone messages are not accepted.

PDA USE ONLY Date: _____ Check: _____ Amount: _____ Account: _____