

**January 23, 2018**  
**Alliance**  
 Fire Hall  
 315 Cheyenne

**January 24, 2018**  
**Sidney**  
 City Council Chambers  
 1115 13th Ave.

**BACKFLOW TRAINING**

The Nebraska Rural Water Association is sponsoring the upcoming backflow continuing education classes.

- A fee of **\$75 per member** or **\$100 per non-member** will be charged for the classes.
- Pre-registration is required.

Registration for these classes will need to be made online OR by mailing or faxing the attached registration form to our office.

- ♦ Pre-payment for these classes is required for non-members.

Flyers are available on our website:  
 nerwa.org

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT OUR OFFICE.

**BE SURE TO KEEP YOUR CLASS CERTIFICATES!**

You may need them to prove you attended one of our classes. You can call our office to get a second one made which will be **free** but if you call for a third one it will cost **\$20.00.**

- 8:00-9:00 REGISTRATION
- 9:00-10:00 Regulation Update
- 10:00-10:15 BREAK
- 10:15-11:15 **Essentials of a Cross Connection Control Program**
- 11:15-11:30 **Device Descriptions & Uses**
- 11:30-12:30 LUNCH (on your own)
- 12:30-1:15 **Device Descriptions & Uses - Continued**
- 1:15-2:15 **Backflow Exercise**
- 2:15-2:30 BREAK
- 2:30-3:30 **Proper & Improper Installations**
- 3:30-3:45 **Review and Evaluations**

**Presenter: Barney Whatley, NeRWA**

**Credit Hours Requested:**  
 5 hours for Grades 1-4  
 5 hours for Grade 6  
 5 hours for Wastewater

NEBRASKA RURAL WATER ASSOCIATION  
 3390 Ponderosa  
 Wahoo, NE 68066  
 800-842-8039  
 402-443-5216  
 FAX 402-443-5274  
 www.nerwa.org

NeRWA Backflow Re-certification Registration—please bring this portion to class  
 Class Attending: Alliance class 1/23/18 \_\_\_\_\_ Sidney class (1/24/18) \_\_\_\_\_

- Manager
- Lawn Service
- Inspector
- Other \_\_\_\_\_
- Plumber
- Fire Sprinkler Service
- State/Fed Rep
- Certified Water Operator
- Certified Backflow Tester
- Certified Wastewater Operator

Purchase Order # \_\_\_\_\_  
 (If required for billing)

Name \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Representing \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Cash \_\_\_\_\_ Check \_\_\_\_\_ Bill \_\_\_\_\_ N/A \_\_\_\_\_ Paid Online \_\_\_\_\_ E-Mail \_\_\_\_\_

Certificate Numbers:  
 Water # \_\_\_\_\_  
 Grade \_\_\_\_\_  
 Backflow # \_\_\_\_\_  
 Wastewater # \_\_\_\_\_