

**August 20, 2019**  
**Erwinville Rec/Community Center**  
**5110 Rougon Rd, Port Allen, LA**

**Cost**  
**\$125**

**Registration—Please Print Clearly**

System/Company Name:

First Name:

Last Name:

Title:

Operator Id # (if applicable)

**AND**

Last 4 digits of SS # (**required**):

Email Address :

Office Phone #:

Cell Phone #:

Fax #:

System/Company Mailing Address:

City:

State:

Zip:

**PAYMENT METHODS ACCEPTED**

**Checks** to: LRWA, PO Box 180, Kinder, LA 70648

**Credit Cards:** Visa, MC, Am Exp, Discover (**4% processing fee** will be added)

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Total Amt to Charge **including 4%:** \_\_\_\_\_

Phone#: \_\_\_\_\_ Email Address: \_\_\_\_\_

Signature: \_\_\_\_\_

My signature above authorizes LRWA to charge my credit card for the fee of this class + a 4% credit card convenience fee.

Email to: [larwa@centurytel.net](mailto:larwa@centurytel.net) or Fax to: 337-738-5620

A \$15 fee will be applied to refunds requested by August 9th.

No refunds will be granted thereafter.

**LRWA Use Only**

Date Rec'd:

Amount:

Ck #: