*Louisiana Rural*

*Water Association Water Taste Test*

*Entry Form*

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| --- | --- |
| Utility/System Name |  |
| Contact Person |  |
| Contact Phone No.  | ( ) |
| Contact email address |  |
| Water Source  *(Ground or Surface)* |  |
| Number of Connections |  |
| Year system established |  |

**Taste Test Rules**

* System must be a member of LRWA
* Collect water in a quart size glass container (be sure to package water carefully)
* Please do not fill container to top
* DO NOT “chill” water
* Label the container with your system name, contact person & phone number.

Water must be received by Monday, April 29th, 2024, before 3pm and can be brought or mailed to LRWA, 1325 3rd Avenue, Kinder, La 70648

**For your water to be eligible, this form must be emailed to** **lsonnier@lrwa.org** **or faxed to (337) 738-5620 before Friday, April 26th, 2024.**