



**FLORIDA PUBLIC POOL SPECIALIST CERTIFICATION**  
 Florida Swimming Pool Association, Providership #0000917  
 Florida Public Pool Specialist CILB #0611965, 16 Hours CE (BP, WPS)

**Sponsored by the Manasota Chapter of FSPA**  
**November 1 - 3, 2017**

**Wednesday November 1, 5:30 - 9:30, Thursday, November 2, 5:30 - 9:30,**  
**Friday, November 3, 8:00 a.m. to 5:00 p.m.**

**Sun-N-Fun RV Resort**  
**7125 Fruitville Rd, Sarasota, FL 34240**

**1. REGISTRANT (USE ONE FOR PER PERSON)**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Company \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

**2. REGISTRATION FEE**

Member ..... \$300.00.....\$ \_\_\_\_\_

Non - Member..... \$400.00.....\$ \_\_\_\_\_

**Course Registration Fee is NOT refundable after first day of is completed.**

**YES** Mail FPPS Manual \* ..... \$7.00.....\$ \_\_\_\_\_

**3. METHOD OF PAYMENT**

**TOTAL AMOUNT DUE \$ \_\_\_\_\_**

*\*Must register 2 weeks prior to class to receive manual before start of course. If registration is cancelled, the cost of FPPS manual will be deducted.*

Check # \_\_\_\_\_ Make checks payable to Florida Swimming Pool Association

Charge  MasterCard  Visa  American Express Billing Zip Code \_\_\_\_\_

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Cardholder Name \_\_\_\_\_ Signature \_\_\_\_\_

**4. SEND COMPLETED FORM & PAYMENT**

Florida Swimming Pool Association - 2555 Porter Lake Drive , Sarasota, FL 34240  
 Phone: 941-952-9293 - Fax 941-366-7433  
 Mary Anderson, Education Program Manager - Mary@FloridaPoolPro.com  
**Or Register & Pay Online at [www.FloridaPoolPro.com/fpps-course/](http://www.FloridaPoolPro.com/fpps-course/)**