



# AQUARIUS

S Y S T E M S

**Please use the form below to register members of your organization who are interested in attending. Photocopy this page if additional forms are needed. Space is limited so don't delay!!**

Organization/Lake Name: \_\_\_\_\_

Registrant Name/Title: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Years or Harvester Experience: \_\_\_\_\_

Aquatic plant identification: Beginner Intermediate

Registrant Name/Title: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Years or Harvester Experience: \_\_\_\_\_

Aquatic plant identification: Beginner Intermediate

Registrant Name/Title: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Years or Harvester Experience: \_\_\_\_\_

Aquatic plant identification: Beginner Intermediate

**TOTAL DUE:** \$ \_\_\_\_\_ (U.S. \$75 x \_\_\_\_ registrants) *Payment due in full at time of registration.*

\_\_\_\_\_ Check enclosed

\_\_\_\_\_ Credit Card - *For credit card orders, please complete the information below*

Name as it appears on charge card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

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

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

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

**Note: For security purposes, if paying by credit card, preferably, mail or fax the form only.**

## **PRE-REGISTRATION IS REQUIRED!**

**DUE DATE:** Please return registration forms and full payment no later than April 26<sup>th</sup>, 2023

**MAIL TO:** Aquarius Systems, PO Box 215, North Prairie WI 53153-0215 or **FAX TO:** 262-392-2984

**PHONE:** 800-328-6555 or 262-392-2162 **EMAIL:** dawnk@aquarius-systems.com