



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 or you can pay online at <https://aquarius-systems.com/wp-content/uploads/2023/03/AQUARIUS-SYSTEMS-Weed-Harvesting-Seminar-Payment.htm>

PRE-REGISTRATION IS REQUIRED!

DUE DATE: Please return registration forms and full payment no later than May 1st, 2024

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