

Mississippi Continuing Education for Professional Loggers

PRE-REGISTRATION FORM

Name _____

Company _____ Title _____

Address _____

City _____ State _____ Zip _____

Day Phone (_____) _____ Night Phone (_____) _____

E-mail _____ Fax (_____) _____

Primary Business Type:

Logger Landowner Other Contractor (specify): _____
 Timber Buyer Wood Dealer Trucking Consulting Forester
 Industry Forester BMP/Silviculture Other (specify): _____

Registration fee: \$50 per person per workshop (non-refundable) for all workshops. Advance registration discount is \$35 per person per workshop. The registration form and fee must be received in our office one week before workshop date to receive the \$35 rate. Within one week of workshop registration, fee is \$50.00 per person for each workshop.

Please indicate which workshops you wish to attend:

Module	Date	Location	Number Attending	Amount (\$35 or \$50 each)	Total
1. Intro					
2. BMP					
3. Safety					
4. Business					

_____ I would like to have directions to these workshops mailed to me.

Payment by check or money order only (made payable to Mississippi State University).

Return registration form and check or money order to:

For Office Use Only

Reg. Received _____

Postmark _____

Payment Received _____

Amount _____

MOP: _____

CID _____

Confirmation _____

LOGGER EDUCATION
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