

Class Registration Form Instructions

Please read through all instructions below before submitting your registration form. If you have any questions please email training@bmibackflow.com or call 800-841-7689

- Please fill out all of the information on the following Class Registration Form unless it is marked as optional. Failure to provide all the required information may result in your registration being incomplete and you may not be enrolled in the class.
- If payment is not included or indicated on the form, your registration will be considered incomplete and you will not be enrolled in the class.
- Each registrant must fill out a new form for each class they wish to attend. If you have multiple registrants, you must fill out a new form for each registrant.
- For class information and a list of available classes, please see our website at www.bmi-backflow.com
- *Mailing address is required for any class we need to send out manuals for. Please provide the address
 where you want to receive these materials. These classes include but not limited to online Cross
 Connection Specialist Certification, Water Distribution Exam Review, Water Treatment Exam Review.
- For Hybrid courses, you will be asked to provide a preferred exam date. We will attempt to take this into account when scheduling the exams, however you may be assigned to a different day if your preferred day cannot be accommodated.
- If the class you are registering for does not exist, or is no longer open for registrations, you will be moved onto a wait list for the next available class opening.
- Completed forms may be submitted through email to training@bmibackflow.com or via mail sent to BMI - Registrars Office 17752 NE San Rafael St. Portland, OR 97230
- Registrations must be received no later than 10 business days before an online/blended course requiring manuals or 5 business days before any other course.

BMI is dedicated to the pursuit of clean, safe drinking water through education. 17752 NE San Rafael Street, Portland, OR 97230 (503) 255-1619 · (800) 841-7689 Email: bmi@bmibackflow.com · Website: www.bmi-backflow.com

Backflow M	Ianagement Inc.	Class Registration Form Student Information
S	tudent Name	
	Company	
PI	hone Number	
I	Email Address	
qo)	Mailing address* tional for in-person classes)	
	City	State Zip
		Class Information
	Class Title	
	Class Date(s)	
	Location	
If you are registering for a Water Distribution or Treatment Exam Review Class please provide the level you will be testing for (1-4)		
If you are registering for a hybrid course, please provide your preferred testing day:		
Payment Information		
Select an option below:		
	If paying with a Check, please mail the check with this form in the same envelope. Check number:	
	If paying with Cash, please mail the cash with this form in the same envelope. Exact payment is required.	
	If you would like to be in optional PO number	voiced please provide an email address to send the invoice to and an
	Billing Email Address	
	PO Number	
		a held credit, please provide the name & phone number of the person isted under to be verified in our system.
	Name	
	Phone	

Please Note: Credit card payments are only accepted through registering via our website www.bmi-backflow.com.