

URI Outreach Center

**Invasive Plant Management
Certification Program**

January 2010

Registration Form

Please return this form and a check payable to University of Rhode Island to **Kate Venturini:*

FAX 401-874-2259

STANDARD MAIL URI Outreach Center
3 East Alumni Ave
Kingston, RI 02881

EMAIL kate@uri.edu

*Please make check or money order for \$150 payable to University of Rhode Island
Please Respond by January 8, 2010. Space is limited!*

Name: _____

Company Name: _____

Job Title: _____

Mailing Address: _____

Town / City: _____ State: _____ Zip Code: _____

Phone Number: _____

Email: _____

Professional Licenses / Certifications Held:

(Please include license numbers where applicable – e.g. Pesticide Applicator License, LID Certification, Arborist License, RINLA member)
