

## Membrane Treatment Workshop Registration Form

**Name:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**System:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**Registration Deadline is [May 1st, 2018](#)**

Please complete the following information and return it to:  
Iowa Lakes Regional Water  
P.O. Box 555  
Spencer, Iowa 51301

Or

**Call:** (712) 262-8847  
**Fax:** (712) 262-2841  
**Email:** [Kelly.Graplar@ilrw.org](mailto:Kelly.Graplar@ilrw.org)

