

VIRGINIA RURAL WATER ASSOCIATION PRESENTS

Prepare with Purpose : WW Operators Certification Class 1&2 (15 Wastewater CPEs)

Wed. & Thurs.

**March 4 & 5,
2026**

**Location:
UVA Wise Oxbow
Center**

16620 E. Riverside Dr.
St. Paul, VA 24283
(Wise & Russell County)

**REGISTRATION
REQUIRED**



Quality On Tap!

2138 Sycamore Avenue
Buena Vista, VA 24416
Phone: 540-261-7178
Fax: 540-261-2465
On the web: www.vrwa.org

Description: This two-day Wastewater Certification course is structured around the official 2025 “Need to Know Criteria”. This course will focus on the core knowledge operators will use for preparation of the exam and discussion on suggested reference materials and formula sheets. Participants are encouraged to bring their reference materials for Operation of Wastewater Treatment Plant Volumes 1& 2 (8th edition); notebook; pen; pencil, highlighter, and calculator.

**PRE-REGISTRATION IS REQUIRED
Class Size Limited to 20**

Instructor: Betty Green (VRWA)

Class Time:
Wednesday, March 4 & Thursday, March 5
8am - 5pm

Lunch: 1hr on your own

Cost: VRWA Members - \$250
Non-members - \$350

To Register: The preferred method for registration is online at the VRWA website (www.vrwa.org). If an attendee does not have internet access, he or she may complete the registration form on the back of this page and fax it to the VRWA office at 540-261-2465. For answers to questions regarding the registration process, please call the VRWA office at 540-261-7178.

REGISTRATION DEADLINE: February 25, 2026

Prepare with Purpose: Wastewater Operators Certification Class 1&2

Class Registration Form

Prepare with a Purpose: Wastewater Operators Certification Class 1&2 — 15 CPE's—St. Paul, VA -March 4&5, 2026

Name (as it appears on your license)

System/Organization

Mailing Address

Phone: _____ Fax: _____

E-mail Address (required): _____

Total Amount Due: \$_____ **Check Enclosed** **Visa** **Master Card**

Name (as it appears on your card): _____

Credit Card Number: _____ Exp. Date: ____/____

3-digit CSV security code: _____ City/State: _____ Zip: _____

Email Address for Receipt: _____

Please make all checks out to VRWA and mail to: VRWA, 2138 Sycamore Avenue, Buena Vista, VA 24416

Virginia Rural Water Association
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