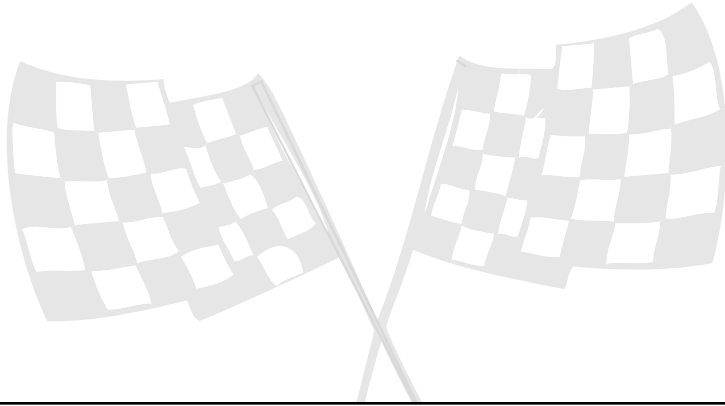


9TH ANNUAL *



CRRC ASSOCIATE MEMBER REGISTRATION PACKET

For Forklift Operators

INCLUDED IN THIS PACKET:

1. Summary Individual Registration Form (*form can be used for your entire company*).
2. Individual Forklift Operator Registration Form (*one form **must** be filled out for **each** participant*).
3. Non-Participant and Non-Volunteer Registration Form (*use one form for your entire company*).
4. Volunteer Registration Form (*one form can be used for your entire company*).



RETURN FORMS BY SEPTEMBER 14, 2018 TO:

California Refuse Recycling Council
1121 L Street, Suite 505 | Sacramento, CA 95814
916-444-2772 | fax 916-442-0623 | trish@crrcnorth.org

CRRC ASSOCIATE MEMBER

Summary Individual Registration Form

Please identify the Forklift Operators who will be representing your company at the Road-e-o, below.
Please list participants in the individual sign-up box. Thank you. **Please print or type information.**

1.	5.	9.	13.
2.	6.	10.	14.
3.	7.	11.	15.
4.	8.	12.	16.

Fees are \$100.00/individual if registered by **September 14, 2018**. Late registration fees are \$125.00/individual.

I have registered _____ individual participants.

COMPANY

CONTACT PERSON

PHONE

EMAIL

NO ON-SITE REGISTRATIONS AFTER 8:30 AM. PARTICIPANTS MUST COMPETE WITH THEIR COMPANY.

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CRRC ASSOCIATE MEMBER

Individual Forklift Operator Registration Form

(photocopy as needed)

NAME

COMPANY

MEAL
RSVP

BREAKFAST will be served at 7:00 am. **LUNCH** will be served at noon. Please indicate below the number of adults and children in your family (**including you**) who will be joining us for breakfast and/or lunch.

OF ADULTS

OF CHILDREN

FORKLIFT OPERATOR
CONTESTANT APPLICATION

Shirt size (check one): M L XL 2XL 3XL 4XL 5XL

I have been forklift certified within the last 3 years.

employee initials

I hereby certify that the contestant is a full-time employee of the company which he/she has indicated above. I further certify that the employee is qualified to operate the vehicle in the category in which he/she has applied.

CONTESTANT SIGNATURE

DATE

EMPLOYER SIGNATURE

DATE

NO ON-SITE REGISTRATIONS AFTER 8:30 AM. PARTICIPANTS MUST COMPETE WITH THEIR COMPANY.

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CRRC ASSOCIATE MEMBER

Non-Participant and Non-Volunteer Registration Form

COMPANY

CONTACT PERSON

PHONE

EMAIL

Please assist us to have an accurate head count for breakfast and lunch!

Use this form for everyone in your company who will **not be participating as a contestant or volunteer (including their family members)**, but will be joining us for meal times, so that we may accommodate them.

CONTESTANTS AND VOLUNTEERS:

Please RSVP for meals *for you and your family members* on your ***Forklift Operator Registration Form*** or ***Volunteer Registration Form***.

BREAKFAST will be served at 7:00 am

LUNCH will be served at noon

MEAL RSVP

Please indicate below the number of adults and children in your company who will be joining us for breakfast and/or lunch.

**TOTAL # OF NON-PARTICIPATING
ADULTS FROM YOUR COMPANY**

*(do not include forklift operators,
volunteers or their family members)*

**TOTAL # OF NON-PARTICIPATING
CHILDREN FROM YOUR COMPANY**

*(do not include children of forklift
operators or volunteers)*

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