

VIRGINIA RURAL WATER ASSOCIATION PRESENTS

VDOT Basic Work Zone Safety / Traffic Control and Flagger Certification

(8.0 CPE's for Water / Wastewater)

**Thursday
January 23, 2025**

Location:

**Wytheville Meeting
Center**

333 Community Blvd.
Wytheville, VA 24382

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 course provides training to properly install all work zones to perform daily maintenance or short term operations. Emphasis is placed on the basics of work zone traffic control, concentration on work zone devices and how to effectively install and maintain them. Upon successful completion, participants will receive VDOT certification.

Note—You do not have to be registered for VRWA's Fall Expo to attend this class. It is a separate class and cost. If you want to register for Expo also, please register at vrwa.org.

PRE-REGISTRATION IS REQUIRED
Class size limited to 30

Instructor: Tracy Puckett (Executive Director of Lee Co. PSA)

Class Times: 8:00 AM– 5:00 PM

Lunch: 1 Hour on Your Own

Cost: \$225 (VRWA members)
\$275 (non-members)

*Cost includes manuals, pocket guides and certification test

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: January 16, 2025

VDOT Basic Work Zone Safety / Traffic Control and Flagger

Class Registration Form

VDOT Basic Work Zone Safety / Traffic Control & Flagger Certification—8 CPE's—Wytheville, VA—
January 23, 2025

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

Cancellation Policy: Full refund less \$25.00 administration fee will be given if VRWA is notified at least 10 days prior to date of class. No refunds will be given for cancellations with less than 10 days' notice, substitutions, however, are permitted. In the event that the class is cancelled by VRWA due to low enrollment, a full refund will be issued.

If paying by check please make all checks out to
Virginia Rural Water Association
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Buena Vista, VA 24416
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www.vrwa.org