

PO Box 1058

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2024 4.1 Distribution Systems

Security Code_____

Name			8 0	im to 5 pm	
Company					
Co. Address	Phone #				
City, State, Zip	Email (Required)				
√ Dates Town Lo	cation	Add	ress	Registration Deadline	
May 14-16 Mitchell M	litchell Technica	al Institute 180	0 E Spruce Street	April 30, 2024	
Members		NO!	N Members Re	gistration Fee	
\$250 – \$250 PERC Discount Manual/Testing Fee Total Registration Fee	0 250 ee \$250	\$500 - \$250 Manual/Tes	PERC Discount sting FeeTotal Registra	250 250 250 tion Fee \$500	
NFPA Pamphlet #58 (required for class)	150	NFPA P (required f	camphlet #58 for class)	150	
Registration Fee + #58	\$400	Tot	al Registration F	ee + #58 \$650	
Registration includes a manual, instructor Class fees are due with registration. NO SHOWS will forfeit their registration.	O LATE OR O	N SITE REGIS	STRATIONS will be		
Signed			Date		
(Office Use Only Date Received		Amount \$	Check #		
Name on Card		Expiration Date			

CC Number _____