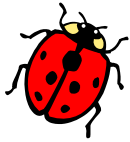


**Tree Pest and Disease Diagnostic Workshop – June 10, 2009
Indianapolis
Drs. Cliff Sadof and Janna Beckerman, Purdue University**



Register by June 3 for the Early Bird Special.

Fee increases by \$50 after June 3.

No WALK INS

Limit 30 People

\$115 IAA member \$160 – non- IAA member

Join IAA for \$40 to get the IAA member rate.

- 8:30 Registration and Coffee**
- 9:00-10:00 Problem Diagnosis - Janna and Cliff**
- 10:00-11:00 Recognizing Key Diseases and Strategies for Control - Janna**
- 11:00-12:00 Recognizing Key Insects and Strategies for Control - Cliff**
- 12:00-1:00 Lunch**
- 1:00-3:00 Tour de Pests – A field tour of pest problems - Janna and Cliff**
- 3:00-4:00 Emerald Ash Borer Control update and demonstration of
treatment methods.**

**ISA CEUs, Pesticide CCHs and
IAH-CEUs will be available.**

**Continental Breakfast and lunch
provided.**

**PLEASE BRING YOUR OWN
HAND LENS!**

**WE WILL BE WALKING
AROUND FOR THIS PROGRAM.**



**Cancellation for all workshops must
be one week before the workshop to
receive refund.**

**Directions, maps and lodging
information will be sent
After we receive your registration.**

**Sponsored by
Purdue's Department of Forestry and
Natural Resources and
Indiana Arborist Association**

2009 Workshop Registration Form
Or you may register and pay by Pay Pal – www.indiana-arborist.org
Directions, maps and lodging information will be sent after receiving registration form.
Cancellation must be received 1 week before the workshop to receive refund.

Name

Company

Work or Home Address – **Please Circle**

City, State, Zip

Work or Home Phone – **Please Circle**

Work or Home Fax – **Please Circle**

Email

Registration Fee For Each Person Attending – 4 from the same company – 5th Free

Diagnostic Workshop – June 10 Indianapolis

\$115–IAA Member..... _____

\$160-Non- IAA Member..... _____

Late fee of \$50 will be assessed after June 3.

IAA Membership - \$40 (per Individual)..... _____

ISA Membership - \$105 (per Individual)..... _____

- ❖ Include IAA membership with this form to receive IAA member rate.
- ❖ Non-members who register as members will have the membership fee added to their invoice.

TOTAL - \$..... _____

(Please include payment or PO number with registration)

Purchase Order Number _____

Make checks payable to *Indiana Arborist Association*

_____ **Visa** _____ **MasterCard** _____ **American Express** _____ **Discover**

Account number _____ **Expiration date** _____

Billing Address and zip code _____

Authorized signature _____

May pay by PayPal www.indiana-arborist.org
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Mail registration to
Rita McKenzie
Forestry and Natural Resources
195 Marsteller St.
West Lafayette, IN 47907-2033

Phone: 765-494-3625
Fax: 765-496-2422
Email: mckenzie@purdue.edu

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