



PAPA Zoom Webinars
 Available dates listed below.
 9:00 a.m. – 12:30 p.m.
3.0 DPR hours, per webinar

All 2020 in-person seminars have been cancelled.

See our [Webinar FAQ](#) for answers to many questions about our webinars.

Before you register: Please be sure you will be able to stay in your selected webinar(s) for the entire duration. No partial credit will be given for webinars, and PAPA does not issue refunds. Each attendee must be logged in separately via their own, individual Zoom account.

Space is limited. If not sold out, registration closes on at 8:00 a.m. the day prior to the webinar. Registered attendees will be emailed the webinar link at 3:00 p.m. on the Friday(s) prior to their scheduled webinar(s). At 3:00 p.m. on the day(s) prior to their scheduled webinar(s) they will again receive the webinar link, in addition to the quiz links and instructions on how to submit their verification photo.

Select which webinar(s) you'd like to attend:

DPR Hours Only (No themes, unless noted)

- September 30, 2020** (Theme: Aquatics)
- October 14, 2020**
- October 21, 2020**
- October 29, 2020**
- November 4, 2020**
- November 12, 2020**
- November 18, 2020**
- November 24, 2020**

- December 2, 2020**
- December 10, 2020**
- December 16, 2020**

DPR Hours & Additional Accreditation

- October 6, 2020**
3.0 ISA Hours Requested
- October 22, 2020**
3.0 CCA Hours Requested

We are looking into additional webinars featuring Structural and GCSAA hours.

Register online at www.papaseminars.com/seminars, or email this page with a completed payment form to register@papaseminars.com. Card payments, only. No check payments accepted for webinars, no exceptions.

- Member Rate:** \$40 per person, per webinar
- Non-Member Rate:** \$45 per person, per webinar

Number of Webinars _____	x \$40/\$45 =	
2019 Membership	\$65	+
2020 Membership	\$70	+
2021 Membership	\$50	+
	Total Payment:	=

Attendee(s) Name(s): _____

Attendee's DPR License #(s) (QAC/QAL/PCA/PI): _____

Attendee's Email(s) (for webinar info): _____

Card #: _____ - _____ - _____

Exp. Date: _____ / _____ **CVV:** _____ **Billing Zip Code:** _____

Name on Card: _____

Email for receipt: _____