

**2010 Western Region Pesticide Meeting
May 18-20, 2010
Soil Fumigation Pre-Meeting – May 18**

The 2010 Western Region Pesticide Meeting will be held May 18-20, 2010 in Boise, Idaho at the [Grove Hotel](#). This includes a one-day Soil Fumigation program that will be held on May 18. The agendas for the meetings are posted at <http://pep.wsu.edu/WRPM>

Registration can be conducted by fax, mail, or online. Payment is required for registration. Credit cards and checks are acceptable forms of payment; purchase orders will not be accepted. [REGISTER ONLINE](#), or mail your registration form and payment to:

**Washington State University
Pesticide Safety Education Cashier
P.O. Box 646382
Pullman, WA 99164-6382**

**Phone 509-335-2830
Fax 509-335-1009**

Hotel Information: The Grove, Boise, ID [(208) 333-8000]. Room rates, **if reserved on or before April 17th are: \$86.00 + 13 % tax (government rate)**. When making your reservation, please identify yourself as a Western Region Pesticide Meeting participant. After April 17th, room rates will increase to \$99.00 per night.

Airport Transportation: The Grove has a contract for a complimentary airport shuttle with [Boise Shuttle Service](#). Exit baggage claim and look for a red and green van with “Boise Shuttle Service” on the side (it is suppose to come every 5 minutes). If there are any problems, call The Grove at 208-333-8000.

Inquiries

Program related information

Carol Ramsay, Washington State University, ramsay@wsu.edu, 509-335-9222

Meeting registration

Wendy Sue Wheeler, Washington State University wswheeler@wsu.edu, 509-335-2830

Meeting website: http://pep.wsu.edu/WRPM/WRPM_10.html

REGISTRATION DATA

E-mail _____	I will attend (check ALL that apply):
Name _____	____ \$40 – Soil Fumigation Meeting, May 18
Organization _____	____ \$80 - Western Region Meeting, May 19-20
Address _____	____ \$25 – Ag Tour, May 19
_____	____ \$20 - Late fee, postmarked after May 7 th
City _____ State _____ Zip _____	
Phone _____ Fax _____	_____ Total Amount Enclosed

Payment (payable to **Washington State University**, WSUTax ID #91-6001108)

[Click here to register with a credit card online.](#)

Check, Visa, or MasterCard Number (no purchase orders) _____

Check/CardName _____ Expiration month/date _____

Signature _____ CV # _____
(Last 3 digits located on the back of card)