Clear Form

Recycling Center Compliance Workshop Registration Request

PRINT CLEARLY OR TYPE (DO NOT COMPLETE THIS FORM UNTIL YOU HAVE READ THE INFORMATION AND INSTRUCTION ON THE REVERSE SIDE)

WORKSHOP INFORMATION

Location and date of workshop requested: _____
Location Date Language

OPERATOR PROFILE

Owner/Corporation Name: _____

Fictitious Business Name (DBA): _____

Business Address: _____
Street Address City Zip Code

Phone Number: ( ) _____ E-mail Address: (required) _____

Operational RC number: _____

Is a reasonable accommodation needed? Yes ☐ No ☐ If yes, what accommodation is required? _____

ATTENDEE INFORMATION:

FIRST NAME	MIDDLE NAME	LAST NAME	Owner/ Operator	Employee
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐

After reading the instructions on the back page, email completed forms to: RecyclerEducationAndExams@CalRecycle.ca.gov

Workshop Information

Attendees will be provided detailed instruction related to the California Beverage Container Recycling Program in the following areas:

- Basic Operational Requirements
- Daily Operations
- Recordkeeping Requirements
- Fraud Prevention & Detection

All attendees must be preregistered to attend this workshop.

Operator Profile

- Provide your Owner/Corporation name, Business name, and Business Address as they appear on your certification.
- Please provide a current phone number where you can be reached if there are questions regarding this form.
- An email address is required in order to process this registration.
- You must include at least one number of an operational recycling center in order to be registered for this workshop.
- If you or any of the listed attendees require a reasonable accommodation, please indicate what accommodation is needed.

Attendee Information

- All attendees must be entered in this area of the form to ensure a seat, including anyone listed in the Operator Profile section.
- Provide first, middle, and last name for each person attending, and indicate if they are an owner/operator or employee of the company.
- If you have English and Spanish speaking employees, make certain to register them in the appropriate workshop for the language they speak.
- Remember, if you are registering individuals for both languages, you must submit a separate form for each workshop, based on the appropriate language.

To Register

Email a completed and scanned copy of this form to: **RecyclerEducationAndExams@CalRecycle.ca.gov**

Registration forms are processed in the order in which they are received. Once you have submitted your form, do not send the original in the mail. Please allow for up to five business days to process your registration form.

Please notify the Recycler Education and Examination Unit no less than 24 hours in advance via email, RecyclerEducationAndExams@CalRecycle.ca.gov or by calling (916) 323-3008, if you are unable to attend your confirmed workshop date.