

**The NYPenn Chapter of the
Academy of Certified Hazardous Materials Managers
with assistance from C&S Engineers
is offering the preparation course:**

**Essentials for Hazardous Materials Managers
in preparation for the CHMM Exam**

April 6, 7, and 8, 2010

Location: C&S Engineers, 499 Col. Eileen Collins Blvd, Syracuse, NY 13212
Time: On April 6 & 7, classes will run from 8AM to 4:30PM; April 8, 8AM to Noon
Course Cost: \$650 Registration
Instructor: Rich Cartwright, P.E., CHMM, CPIM – Former ACHMM Board Member

Cost includes course tuition, review book (Hazardous Materials Management Desk Reference), snacks, lunches April 6 & 7, and a one year (2010) membership in the NYPENN Chapter of ACHMM.

To register for the EHMM review course, please complete the attached form and return it along with a check payable to the “NYPenn Chapter of ACHMM” to the following address:

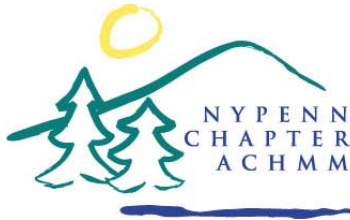
**NYPenn Chapter of ACHMM, c/o Jerry Gordon.
Cornell University
Department of Environmental Health & Safety
395 Pine Tree Road, Suite 210
Ithaca, NY 14850**

You may also register and pay by credit card online at www.nypennachmm.org

Hotel accommodation information and directions will be provided upon receipt of registration or by prior request.

NOTE: The CHMM exam is not offered in conjunction with this review course. The CHMM exam is now offered only at designated computer based testing locations across the country. To sit for an upcoming CHMM exam, you submit an application, along with the applicable fees, to the Institute of Hazardous Materials Managers (IHMM), prior to the exam. Please see the attached Exam FAQs flyer and visit www.ihmm.org for more details.

If you have questions or would like more info, please contact Bill Perkins, CHMM via e-mail at Bill.Perkins@heritage-enviro.com or by phone (607) 275-0647.



**NYPenn Chapter of the
Academy of Certified Hazardous Materials Managers**

2010 CHMM Review Course Registration Form

Name: _____

Home Address:

Home Phone: (____) _____

Home E-mail: _____

Work Address:

Work Phone: ____ (____) _____

Work E-mail: _____

Preferred contact location (check one): Home ____ Work ____

Amount Enclosed (check one):

\$650 ____

Please make checks payable to “NYPenn Chapter of ACHMM”

Credit card orders can be made at www.nypennachmm.org