



PRESENTS:

**ADVANCED
SANITATION
WORKSHOP**



***May 5 - 7, 2009
Birmingham, AL***

Course Description:

This is an in-depth 3-day advanced training program for individuals having responsibilities for sanitation and quality control practices in food and dairy plants. The objective is to provide the individual with advanced skills regarding the properties of cleaning and sanitation. The material is presented in practical terms so that the individual may gain a better understanding of important aspects of producing quality products.

Who Should Attend?

Designed for Production Managers, Supervisors, Foremen, Sanitation and Quality Assurance Personnel.

Topics Include:

- ◆ Chemical Safety/Chemical Testing
- ◆ Cleaning and Sanitizing Concepts
- ◆ Foam Cleaning Theory and Practices
- ◆ CIP/COP Theory and Practices
- ◆ Food Microbiology
- ◆ Sensory Evaluations
- ◆ In-Plant Problem Solving
- ◆ Allergens
- ◆ Controlling Costs



Course Schedule:

The class will start promptly at 8:00 a.m. on Tuesday, and will be concluded by 3:00 p.m. on Thursday. Informal (controlled) discussion sessions and in-plant demonstrations will be held.

Course Location & Accommodations:

The Hampton Inn Colonnade will hold a block of rooms. Room reservations should be made by Sunday, **April 13, 2009** directly with the hotel. **Please advise the hotel that you will be attending the Randolph Associates, Inc. workshop to receive the special discount room rate.**

Hampton Inn Colonnade
3400 Colonnade Pkwy
Birmingham, AL 35243
Phone: (205) 967-0002
Reservations: 800-861-7168
Rate: \$104.00 single/double

www.birminghamcolonnade.hamptoninn.com

Group Code: RSS

REGISTRATION FORM

(ADVANCED REGISTRATION REQUIRED)

Sanitation Workshop

May 5 - 7, 2009

COMPANY NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____ FAX: _____

EMAIL ADDRESS: _____

Participants:

First Name: _____ Last Name: _____

First Name: _____ Last Name: _____

First Name: _____ Last Name: _____

Registration:

	Fee	No.	Total
WORKSHOP Registration (first attendee):	\$895	X 1 =	\$895
(additional attendees):	\$795	X ____ =	_____

Total Registration Fees:

Payment Information:

Make checks payable in US funds to Randolph Associates, Inc.

Payment Enclosed Bill my company (PO#: _____)

Credit Card

Please charge my: Mastercard Visa Am-Ex Discover

_____|_____|_____|_____|_____|_____|_____|_____|_____|_____| Exp: ____/____

Security (CID) Code*: _____

Signature of Cardholder*: _____ Name (Print): _____

Billing Address of Cardholder: _____

**Required to protect against fraud.*

RETURN TO: Randolph Associates, Inc.

Attn: Workshop Registration
3820 3rd Avenue South, Suite 100
Birmingham, AL 35222

Ph: (205) 595-6455
Fax: (888) 874-0587
E-mail: kristy.clark@raiconsult.com

Cancellation Policy:

A full refund will be made if cancellations are received five (5) days prior to the start of the seminar. Attendees canceling later than five (5) days prior to the start of the seminar will be subject to a \$100 service fee. Substitutions will be permitted at any time.