245 Obispo Street <> Post Office Box 10

Guadalupe, CA 93434
(805) 343-2215

CALIFORNIA & FEDERAL LABOR & EMPLOYMENT LAWS FOR FARM LABOR CONTRACTORS

Approved by the Labor Commissioner as Satisfying The Eight Hour Continuing Education Requirement

THREE CLASSES IN 2009

Paso Robles
Tuesday, March 4, 2009
All day
Breakfast & lunch included

Culinary Arts Academy
1900 Golden Hill Road
Paso Robles, CA 93447

Santa Maria
Wednesday, July 1, 2009
All day
Breakfast & lunch included

Atria Maria Del Sol
1405 East Main Street
Santa Maria, CA 93454

Guadalupe
Wednesday, October 21, 2009
All day
Breakfast & lunch included

Far Western Tavern
899 Guadalupe Street
Guadalupe, Ca 93434

Training Topics

Farm labor contractor requirements
Cal/OSHA safety requirements
Workers' compensation
Employment insurance
Wage and Hour rules
Pesticide Safety
Farm Worker Transportation & Housing
Agricultural Labor Relations Act
Sexual harassment in the workplace

Renewal Questions

For questions regarding renewal of your license and your continuing education hour requirements, please contact the DLSE at (559) 248-1893 or (415) 703-4854. The DLSE will review your file and answer specific questions regarding your license.

Class Information

Registration will begin at 7:30 AM. Classes will be held from 8:00 AM to 5:00 PM. Attendees must arrive in time to register for the class. Attendees who arrive after the start of class will not receive the 8 hours of continuing education credit. Your registration fees include course material, breakfast, lunch, refreshment breaks, and course certificate.

COST: **Non-members: $200 plus $100 for each subsequent registrant(s) from same company.**
Association members: $100 plus $50 for each subsequent registrant from same company.

- **The course will be given in English only.**
- **Payment due with registration.**
- **License holders must present their FLC license on the day of the class to receive a Certificate of Completion.**

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2009 CLASSES

REGISTRATION FORM

Please print

NAME # 1: _____ **NAME # 2:** _____

COURSE DATE YOU WILL ATTEND: _____ **March 4, 2009;** ____ **July 1, 2009;** ____ **October 21, 2009**

COMPANY: _____ **STATE LICENSE #** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

TELEPHONE: _____ **FAX:** _____ **CELL:** _____ **E-MAIL:** _____

FEE: **NON-MEMBER:**

1ST PERSON ____X $200 = $_____

SUBSEQUENT PERSON(S) ____ X $100 = $_____

ASSOCIATION MEMBER

1ST PERSON ____X $100 = $_____

SUBSEQUENT PERSON(S) ____ X $ 50 = $_____

TOTAL REGISTRATION FEE ENCLOSED: = $_____

Make checks payable to the "Grower-Shipper Association."
Return the form and registration fee to P.O. Box 10, Guadalupe, CA 93434