

**Owens Consulting Group, LLC**  
**TCEQ Provider #782**  
**MSW Supervisor Courses - Live Online Instructor-Led Training**  
**2026 Course Registration Form**

<b>MSW A (Course #513)</b>	June 2-4	Sept 1-3		
<b>MSW B (Course #514)</b>	June 30-July 2	Aug 4-6	Sept 29-Oct 1	Dec15-17
<b>Waste Screening (Course #341)</b>	July 3	Sept 4	Dec 18	
<b>Specialized Medical Waste (Course #1390)</b>	<b>TBD</b>			

**Please circle the date of the course requested and check the appropriate box(es) below:**

Check applicable	TCEQ Approved Course	Per person
<input type="checkbox"/>	MSW A Supervisor #513 Full Course – 24 hours	\$750
<input type="checkbox"/>	MSW B Supervisor #514 Full Course - 24 hours	\$750
<input type="checkbox"/>	MSW A or B <b>16-hour Renewal</b>	\$650
<input type="checkbox"/>	MSW A or B <b>8-hour Renewal</b>	\$395
<input type="checkbox"/>	Waste Screening #341 - 8 hours	\$325
<input type="checkbox"/>	Waste Screening – Español	\$395
<input type="checkbox"/>	Specialized Medical Waste #1390 - 8 hours	\$395

Name of Participant(s): \_\_\_\_\_

Company: \_\_\_\_\_

MSW License # (for renewals)                     **SW000**                    

**Mailing address (for manuals) – Please use UPS or FedEx Address / No PO Box:**  
 (if you have a different Billing address than the mailing address - please include it)

Street address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email address: \_\_\_\_\_

Please return this completed registration form to: Julie Spradley at: [owenscgtx@gmail.com](mailto:owenscgtx@gmail.com)

Billing Address: \_\_\_\_\_