



GRAS²P TRAINING WORKSHOPS

The first series of workshops will be held in conjunction with the 2009 Annual Meeting of the Washington State Horticultural Association in Wenatchee, Washington

Cost:

\$75 for all three sessions, or \$30 per individual session

\$50 for GRAS²P Orchard Operations Guidance Manual

Note: GRAS²P Guidance Manual is REQUIRED for participation in workshop sessions, and is available only for members of WSHA.

GRAS²P is a Washington tree fruit industry grower-based effort for audit readiness, food safety operating procedures, establishment of standards for sustainable practices, traceability from market back to farm, and continued use of good agricultural practices in orchards.

GRAS²P provides sound economic, environmental, and educational solutions to assure and sustain safe, quality Washington tree fruit production.

Wednesday, December 9

1:00 – 5:00pm

GRAS²P 101 – USDA GAP Documentation & In-Orchard Practices

- Accident Prevention Program
- Worker Health & Hygiene
- Analysis of Hazards
- EZ Audit Preparedness

Thursday, December 10

8:30am – 12:00noon

GRAS²P 102 – Sustainability Basics

- Crop Protection
- Soil Fertility
- Water Management
- Benchmarking
- EZ Audit Preparedness

Thursday, December 10

1:00 – 5:00pm

GRAS²P 103 – Global G.A.P. Documentation & In-Orchard Practices

- All Farm Base
- Crop Base
- Fruits and Vegetables Base
- EZ Audit Preparedness

GENERAL INFORMATION

Orchard /
Warehouse

Orchard / Warehouse Name

Address:

Street Address

City

State

ZIP code

Phone:

Email:

ATTENDEES

Please list individuals attending training, along with contact info.

Participant:

Email:

Ph:

Participant:

Email:

Ph:

Participant:

Email:

Ph:

Participant:

Email:

Ph:

PAYMENT FOR WORKSHOPS

Please fill out the payment information prior to event and submit via email or fax, or sign-up by phone.

- \$75 for all three sessions
 Or \$30 per individual session
 GRAS²P 101 GRAS²P 102 GRAS²P 103

- \$50 for GRAS²P Guidance Manual
 ** REQUIRED for workshops **

TOTAL = \$

- Check (*payable to WSHA*)

- Visa Mastercard

Credit Card #

Exp Date:

/

CCV#:

Name on Card

Cardholder's Signature