



2010 Veriforce Contractor Meeting – March 3rd

The 2010 Veriforce Contractor Meeting will be held in Houston, Texas on March 3, 2010. Registration and payment of a \$50 registration fee is required by February 15 for those who wish to attend. In order to confirm attendance, please fill out the registration form and email to billing@veriforce.com or fax to 281-363-2993. Meals, including a continental breakfast and BBQ lunch buffet, will be provided for those attending.

In conjunction with the Contractor Meeting, an Instructor-led Evaluator Training Course will be held at the same location on March 2nd. The cost of the 7-hour course is \$750 per person. For more information on Evaluator training, please [click here](#).

The meeting will be held at the following location:

DoubleTree Hotel Houston Intercontinental Airport
15747 JFK Blvd.
Houston, Texas 77032
Phone (800) 222-8733
www.houstonintercontinentalairport.doubletree.com

Note: Rooms booked by February 15 are available at a discounted rate of \$99. In order to receive the discount, please use the Group/Promotion code **VVF** when booking your room either online or by telephone. There is a limited number of rooms blocked at the discounted price. Please reserve your room as soon as possible and before the deadline in order to ensure you get the best rate.

Recently, Veriforce posted a notification requesting feedback from contractors for potential agenda items. If you have ideas or suggestions for items to discuss during the meeting, please send them to meetings@veriforce.com for consideration prior to February 1. Items currently slated to be on the agenda include, but are not limited to, the following:

- Regulatory Changes – AMAOP Task Update panel (hosted by several Veriforce Operators)
- Industry Outlook Presentation – Member of INGAA
- CenterPoint Energy Contractor Meeting – OQ Plan Changes (hosted by CenterPoint Energy)
- Contractor Advisory Group – Explanation and summary of results
- Veriforce Training Site Partnership Program
- Changes in VeriSource (screen changes, new features, etc)
- Veriforce Third Party Audit
- Drug/Alcohol Update
- Revised Simulation Guidance
- Third-Party Evaluator Checklist for Contractors
- Auditing
- Evaluator Authorization Expiration Date – 30-day Grace Period implemented

A formal agenda will be drafted after the feedback request deadline and posted in VeriSource for your convenience.

Thank you and we look forward to another successful, productive meeting. If you have any questions, please email meetings@veriforce.com.



2010 Veriforce Contractor Meeting Registration Form

In order to confirm attendance for the Veriforce Contractor Meeting that is being held on **March 3, 2010**, please fill in your information below and provide your credit card number. A registration fee of \$50.00 will be charged for each attendee. In conjunction with the Contractor Meeting, an Instructor-led Evaluator Training Course will be held at the same location on March 2nd. The cost of the 7-hour course is \$750 per person. For more information on Evaluator training, please [click here](#). If you are interested in attending the Contractor Meeting and/or the Evaluator training course, please complete the form below and note the individual(s) who will be attending and which events they will attend. Once you have completed the form, please return it to billing@veriforce.com or fax to 281-363-2993.

Attendee Information

Company Name: _____	Contractor Meeting	Evaluator Training
Attendee Name 1: _____	<input type="checkbox"/>	<input type="checkbox"/>
Attendee Name 2: _____	<input type="checkbox"/>	<input type="checkbox"/>
Attendee Name 3: _____	<input type="checkbox"/>	<input type="checkbox"/>
Attendee Name 4: _____	<input type="checkbox"/>	<input type="checkbox"/>
Phone: _____ Fax: _____		
Email: _____		

Billing Calculation

	X	\$50.00	=	\$
# Contractor Meeting		\$50.00 fee per person		Total
	X	\$750.00	=	\$
# Evaluator Training		\$750.00 fee per person		Total

Credit Card Authorization

Credit Card Information:

_____ Discover _____ MasterCard _____ Visa _____ American Express

Card number: _____ Exp. date: _____

Cardholder information:

Name _____

Address _____ Zip code: _____

Check here to request receipt for payment of the registration fee.

Return completed form to billing@veriforce.com or fax to 281-363-2993.