



# ANNOUNCING....

**Master Food Preserver Training**  
For experienced trainers and individuals  
with skills in one or more areas of food  
preservation who want to assist in  
program development and sustainability.

**Tuesday, October 22, 2013 at 8 a.m. to**

**Friday, October 25, 2013 at 4 p.m.**

**Located at: University of Arizona Cooperative Extension Office**

**4341 East Broadway Road**

**Phoenix, AZ 85040**

**Presented by Utah State University Extension Faculty  
with over 14 years experience in Master Food Preserver  
Programming**



**CALS**  
COOPERATIVE  
EXTENSION  
Maricopa County

Hosted by University of Arizona Cooperative  
Extension-Maricopa County Family, Consumer  
and Health Sciences Faculty  
Patty Merk and Traci Armstrong-Florian

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**Master Food Preserver Training Registration Form**

**Dates of Training: October 22-25, 2013 in Phoenix, AZ**

**Registration Due: Wednesday, October 15, 2013 (unless other arrangements made)**

**Cost for Arizona Participants: \$50.00 (due to scholarships)**

**Cost for Out of State: \$200. 00**

**Registration includes materials, supplies, continental breakfast, breaks and lunch**

**(Please print and fax/email to Celeste Burrell at 602-827-8292**

**(burrellc@cals.arizona.edu)**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Best Phone Number \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

Special dietary needs \_\_\_\_\_

I have experience in one or more areas of food preservation: Yes No **Complete Attached Information Form**

**For Arizona Participants, I have enclosed:**

\_\_\_ Payment of \$50 in the form of a check payable or Interdepartmental Billing payable to University of Arizona. Account number to charge \_\_\_\_\_

**For All Others, I have enclosed (check which applies):**

\_\_\_ Payment of \$200.00 in the form of Purchase Order Number \_\_\_\_\_

\_\_\_ Payment of \$200 in the form of a check payable to the University of Arizona.

**When remitting—please have your department attach a copy of this completed form to the check and mail to: Attention:**

**Celeste Burrell, University of Arizona Cooperative Extension, 4341 East Broadway Road, Phoenix, AZ 85040.**

**For more information about the course, contact  
Patty Merk, 602-908-0531 or  
pmerk@cals.arizona.edu**

Persons with a disability may request a reasonable accommodation, such as a sign language interpreter by contacting Celeste Burrell, 602-827-8253). Requests should be made as early as possible to allow time to arrange the accommodation.

**Master Food Preserver Training**

**October 22-25, 2013**

**University of Arizona Cooperative Extension**

**PARTICIPANT INFORMATION FORM**

**Please return with registration form by October 15, 2013.**

**Name:** \_\_\_\_\_

**County/State:** \_\_\_\_\_

**Best Phone Number:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**I have experience in the following food preservation methods: (check all that apply)**

\_\_\_\_ Canning (Water bath)

\_\_\_\_ Drying (Air)

\_\_\_\_ Canning (Pressure)

\_\_\_\_ Freezing

\_\_\_\_ Drying (Dehydrator)

\_\_\_\_ Freeze Drying

\_\_\_\_ Drying (Oven)

\_\_\_\_ Other \_\_\_\_\_

**I have experience in preserving the following foods: (check all that apply)**

\_\_\_\_ Poultry, red meat and seafood

\_\_\_\_ Fruits

\_\_\_\_ Vegetables

\_\_\_\_ Herbs

\_\_\_\_ Dry beans, other legumes

**Other comments on your food preservation experience: (use back of page if needed)**