

## 2025 Certified Pool Operator Class Information/Registration Letter

Thank you for your interest in taking a Certified Pool Operator course with the Pool Doctor. We are sure that you share the basic belief that more knowledge/education will provide a safer and healthier swimming environment and reduce operational costs/liability at the same time.

The benefit of taking a class with the Pool Doctor is that you receive "real world" information from the premier swimming pool service company in Colorado. There are several options available to you to take the course and receive certification; taking the course from a health department or "catalog company" does not give you the added insight and invaluable experience of an instructor that is in the pump room/poolside every day (at our elevation).

Our instructor is the ONLY Pool and Hot Tub Alliance (PHTA) Certified Service Pro (the highest PHTA technical certification) AND Certified Pool Operator Instructor in the State of Colorado. We bring the "theory" to the "real world" in every class we teach.

### Class types:

#### **TRADITIONAL 2-DAY Class**

- IN-PERSON \$399.00
  - Attend class in the beautiful new training center at the Apartment Association of Metro Denver

FUSION – AT HOME/ONLINE – IMPORTANT NOTE – This class is available in English, Spanish, or French.

- Fusion class \$499.00
  - This class offers the convenience of studying all the chapters of the CPO handbook on-line/at-home instead of attending a Traditional 2-Day class
  - Study the chapters of the handbook (and take on-line quizzes) on-line at your own pace
  - Fusion course students test on the 2<sup>nd</sup> day of any (see dates below) Traditional 2 Day Class

#### **CLASS/TEST RE-TAKE**

Note - If a student does not pass the test the student can re-take the class at no charge until they pass

- To re-test is \$25.00 per attempt (unlimited attempts).
- Re-test is available on the 2<sup>nd</sup> day of any public traditional class (schedule below)

### **PRIVATE/GROUP - TRADITIONAL 2-Day Class**

- 20 students minimum
- Taught on-site at one of your properties
- Please contact Craig at 303-229-7642 for more information/pricing/set-up class dates
- -- We strongly recommend taking the IN-PERSON class if possible. IN-PERSON learning is typically far better for most people. Our IN-PERSON students consistently score better (more likely to pass) than virtual or Fusion class students.
- -- A Spanish handbook and test is available for the Traditional 2 day class. If your maintenance person does not speak English as their first language or isn't fluent in English, we STRONGLY recommend the on-line class taught in Spanish instead of a live class taught in English.

# Traditional 2-Day Class starts at 8:30am and typically finishes about 4:30 PM

#### 2025 Traditional 2-Day Class dates:

• Feb 5/6

June 25/26

December 3/4

April 24/25

July 17/18

May 13/14

October 28/29

## Traditional 2-Day Class IN-PERSON location/address:

Apartment Association of Metro Denver – 7100 E Belleview Ave, Suite 305, Greenwood Village, CO 80111

### Class Requirements/ Please bring:

- Paper/pencil
- Simple calculator (not a cell phone)
- Government issued ID (required for testing).



# **CPO Class Registration Form**

(please use one form per student)

Requested Class Date:			
Requested Class Type:			
Student Name	Personal Cell Phone	Personal E-ma	il
Personal address (required for Fusion	on Course):		
*The CPO handbook can b	pe picked up at the Pool Doctor office (8-4	M-F) located at 6300 W Mississippi	Ave, Lakewood, CO 80226.
Please make sure to include for any reason (sickness, inclement to	de the student's cell phone &/or e-mail ado weather, etc.)	dress - in the event we need to resch	nedule the class at the last minute
Name of Person registering studen	t(s) Phone	E-ma	ail
	ool Doctor customers in good standing onle emailed to the "Name of Person Registerin		
	nade payable to "Pool Doctor" yment to: Pool Doctor, PO Box 150301, La	kewood, CO 80215	
	h@copooldoctor.com or fax to 303-675-8.  Ifer you can call our office with your credit		the dispatcher
Name on Card		CC #	CVV (3 digit)
Billing Address			
Signature		Printed Name	

Please complete and e-mail this form to <a href="mailto:dispatch@copooldoctor.com">dispatch@copooldoctor.com</a> or fax to 303-675-8280.

Once payment is received the spot(s) will be reserved and guaranteed.

Please feel free to call our office at 303-232-8600 with any additional questions.