

# Tree Health Care Workshop



## March 25, 2010

8:00am - 4:00pm

Dayton, OH Area

**Build Your PHC Business; Research Update;  
Air-Spade Practical Applications; Choosing  
Tools for the Tree Care Professional**



**ISA CEUs Available**

### Morning Science Sessions

#### Common Scale Insect Pests on Shrubs and Trees

**Speaker: Dr. Joe Boggs**

*Ohio State University - Extension*

What are the most prominent scale insect pests on shrubs and trees in Ohio? This presentation will discuss the biology and life cycle of armored and soft scale insects and the importance of this information as it relates to successful management of these pests.

#### Soil Applied Insect Management Products: Tools for the Tree Care Professional

**Speaker: Shawn Bernick, MS**

*Rainbow Treecare Scientific Advancements*

To effectively control an insect pest, an arborist must be able to choose from a wide variety of products and application techniques. The question becomes, which is the "right" combination for the problem? Shawn will review a variety of soil applied products that can be used to manage common insect pests within Ohio to achieve successful results for your company and your clients' trees.

#### Dinotefuran Research Update

**Speaker: Shawn Bernick, MS**

*Rainbow Treecare Scientific Advancements*

Shawn will review the latest information relating to the insecticide active ingredient Dinotefuran and its implications for the tree healthcare professional.

### Afternoon Business Sessions

#### HOW TO INTELLIGENTLY & AFFORDABLY BUILD YOUR TREE/PLANT HEALTHCARE BUSINESS TO MAKE IT THRIVE

**Speaker: Donald Lies**

*Rainbow Treecare Scientific Advancements*

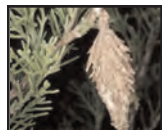
Don will discuss the five key areas of growth and risk that a small company must address to generate positive cash-flow, increase revenues with existing customers, find and land new customers, and build a proactive selling engine that will always keep you ahead of the competition and discounters.

#### AIR-SPADE: PRACTICAL USE IN THE FIELD

**Speaker: Jennifer Morgan**

*Rainbow Treecare Company*

Jen has over 5,000 hours in the field with the Air-Spade having worked on the Root Enhancement team of the Rainbow Treecare Company for over five years. Currently working as a Consulting Arborist, Jen will review the entire process: sales, equipment requirements in the field, follow up, and other suggestions to help companies not only get started, but increase their productivity.

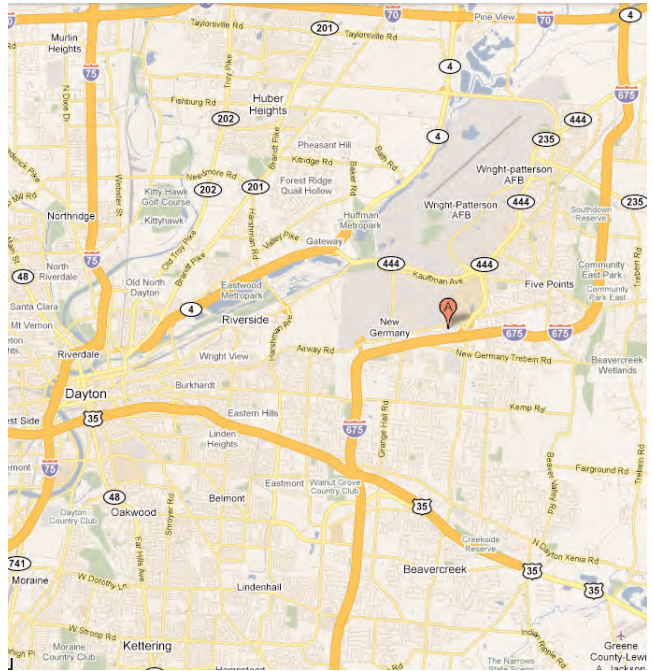


**LIMITED SEATING AVAILABLE!**

# Tree Health Care Workshop

## LOCATION

**Holiday Inn – Dayton off I-675**  
2800 Presidential Drive  
Fairborn, OH 45324  
937-426-7800



Discount rooms are available for the rate of \$102 per night. Please call the Holiday Inn directly at 937-426-7800 and reference the 'Tree Health Seminar' rate.

## COST

### MORNING SESSION ONLY

(includes breakfast, please arrive between 8am – 8:30am)  
**\$50** for the first attendee; **\$40** for each additional attendee

### AFTERNOON SESSION ONLY

includes lunch, please arrive between 11:15am – 11:30am)  
**\$50** for the first attendee; **\$40** for each additional attendee

### WHOLE DAY

(includes breakfast and lunch)  
**\$75** for the first attendee; **\$65** for each additional attendee

## REGISTRATION

**CALL:** 1-877-272-6747

**FAX:** 952-252-0504

**EMAIL:** [kstrub@treecarescience.com](mailto:kstrub@treecarescience.com)

**MAIL:**

RTSA  
Attn: Karin Strub  
11571 K-Tel Dr  
Minnetonka, MN 55343

**Half Day:** \$50 + additional attendees (\$40 per person) \$ \_\_\_\_\_ = \$ \_\_\_\_\_  I have enclosed a check

**Whole Day:** \$75 + additional attendees (\$65 per person) \$ \_\_\_\_\_ = \$ \_\_\_\_\_  Bill my card

I request a vegetarian meal   Invoice Me

What I am most interested in learning: \_\_\_\_\_

I cannot attend the seminar - please contact me for training options

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ EMAIL: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

VISA DISC MC AmEx CARD# \_\_\_\_\_ EXP. DATE: \_\_\_\_\_ CVV CODE: \_\_\_\_\_

NAME ON CARD: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_