



**WRAC Registration for Institutions**  
**zerowastepittsburgh.org**  
**412-770-6951**

**Contact Information**

Name of Institution: \_\_\_\_\_ Today's Date \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Primary Contact (Required) \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Secondary Contact (Optional) \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

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**Building Info**

Do you own/rent/borrow the building in which your institution operates (Choose)?

Number of Employees/Students/ Patients:

Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

*(If location is different from above)*

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**Payment Information**

Upon review of your submitted form, your payment will be determined based on the Small, Medium and Large categories listed on the Zero Waste Pittsburgh website.