



COMPANY REGISTRATION FORM

Company Name: (Location / site / transit #)		Primary Contact: (First and Last name)	
Address:		Phone:	Fax:
City / Province:	Postal code:	Email Address:	

COURSE NAME	Start Date	LOCATION	Employee Name (First and Last)

Fees and certification

1. Course fees are due at the time of registration by credit card, or with approved credit application.
2. Changes to class registrations are available by contacting the training center up to 5 business days prior to the course commencement.
Transfer and Cancellation fees may apply
3. Certificates are provided to students upon completion of the course.
4. Renewal courses require review of previous course materials prior to attending class. Students must review their Student Reference Guide (Reference guides are available for purchase if required)
5. For certification students must be able to commit to the time frame set out for the full course to obtain all required skills



Payment Information

Credit card: _____ Expiry: _____ CSC#: _____

Name on Card: _____ Signature: _____