

Company Registration Form

Centre

Company Information

Company Name

Contact Name

Address

Email

City

Phone Number

Postal Code

Fax Number

Student Information

First Name	Last Name	Birth Date mm/dd/yy	Course Name	Class Date mm/dd/yy	Class Number (SJA Use)

Comments:

Payment Information

Approved Account PO# Debit Cash Company Cheque Visa Mastercard American Express

Credit Card Number **Exp Date**

Name as shown on Credit Card

Administrative Information

- Cancellations/Withdrawals with two (2) or more business days' notice will receive a refund less a \$25.00 administration fee. Exceptions apply to the IDP, AFA and EMR programs which require 3 weeks' notice. Speak to your Customer Service Representative.
 - Cancellations/Withdrawals with less than two (2) days' notice will be charged the full amount of the class.
 - Notification of transfer up to the time of the class(8:00 am) will be completed with an administration fee of \$25.00.
 - Notification of transfer after class commences will be considered a "No Show".
 - Failure to attend, "No Show" will be charged the full cost of the class.
 - **For Recertification Courses a copy of the student's current certification needs to be included with this form.**
 - Please indicate in the comments section if this is to Reschedule or Cancel a previous fax.
 - An email will be sent confirming registration in the selected course and will contain Centre specific information. If you require additional information please contact the Centre.
 - Upon completion of training, original certificates will be provided to students. Upon request a copy of the certificate may be provided to the employees company.
- ** Pre-requisites are required for some of our programs. Please contact staff, website or our course calendar for more information. Students will not be enrolled into these programs until the pre-requisites are completed.

Print Name

Signature

Date