

Enrollment Form
OCCUPATIONAL TRAINING

| | | |
|---|--|---|
| <i>Course Details</i> | | |
| ONLINE ONLY | | |
| Participant Information <i>(complete fully and print clearly)</i> | | |
| Legal First Name | Legal Middle Name | Legal Last Name |
| Mailing Address (Street; PO Box) | | Birthdate (mm/dd/year) ____ / ____ / ____ |
| City/Town | | Province, Postal Code |
| Business Phone Number | Cell Phone Number | Email Address |
| Company Information <i>(check option, provide name)</i> | | |
| <input type="checkbox"/> Employer's Company Name OR <input type="checkbox"/> Your Own Company Name | | |
| Courses I wish to enroll in <i>(check all that apply)</i> | | |
| Mechanized Harvesting: <input type="checkbox"/> Feller Buncher Operator <input type="checkbox"/> Processor Operator <input type="checkbox"/> Hoe Chucker Operator <input type="checkbox"/> Skidder Operator <input type="checkbox"/> Forwarder Operator <input type="checkbox"/> Hydraulic Log Loader Operator | Road Building: <input type="checkbox"/> Dozer Operator <input type="checkbox"/> Excavator Operator <input type="checkbox"/> Grader Operator <input type="checkbox"/> Wheel Loader Operator <input type="checkbox"/> Rock Drill Operator <input type="checkbox"/> Backhoe Operator | Other: <input type="checkbox"/> Basic Forest Worker |
| Course Fee for Online Training: No charge for BC-based forest companies | | |

*Your company and personal information is only used for purposes of course enrollment. Confidential information will not be disclosed to third parties.
Your information is valuable and we ensure all reasonable measures are taken to protect it.*

Send completed form to BC Forest Safety by:

1. Email: training@bcforestsafety.org
2. Fax: 250-741-1068
3. Mail: 420 Albert Street, Nanaimo, BC V9R 2V7

NOTE:

- Online learning is self-paced, flexible 24/7 access.
- Basic computer skills are required, and reliable internet.

Questions? Call us toll free: 1-877-741-1060