

Enrollment Form BASIC INCIDENT INVESTIGATION

Course Location				Course Date		
Participant Information (com	plete fully an	d print cl	early)			
Legal First Name	Legal M	Legal Middle Name			Legal Last Name	
Nickname (if applicable)	Former	Former Name (e.g. maiden name)			Birthdate (mm/dd/year)	
Mailing Address (Street; PO Box)		City/Town				Province, Postal Code
Phone Number	Personal/Cell	Phone		Email Address		
Food Allergies / Dietary Restrictions?						
Company Information						
Employer's Company Name OR D Your Own Company Na.			Name	WorkSafeBC Account Number		
Work Activity (full-phase logging; silviculture; log hauling; road building; other – please indicate)						
Payment Information (payment must accompany this enrollment)						
Course Fee: \$357.00 (\$	6340.00 + \$1	7.00 GS [.]	Т)			
Payment Method: □ Enclosed Cheque (payable to BC Forest Safety Council) □ VISA □ MasterCard □ Mast						
Name on Card			Expiry Date (MM, YY)		
Credit Card Number						
Cardholder's Signature						

Your company, personal and financial information is only used for purposes of course enrollment and program management. 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:		IMPORTANT NOTES:			
1. 2.	Email: <u>training@bcforestsafe.org</u> Fax: 250-741-1068	A) If minimum enrollment is not met two weeks prior to a course start date, we reserve the right to cancel the session and reimburse paid registrants.			
3.	 Mail: Unit 8C - 2220 Bowen Road, Nanaimo, BC V9S 1H9 Questions? Call us toll-free: 1-877-741-1060 	B) Please notify us as soon as possible if you need to withdraw or reschedul your enrollment.			
		C) Refunds or credits will not be issued for 'No Shows.' The only exception to this is for unplanned emergencies/illness.			