

PLEASE COMPLETE ONE FORM FOR EACH REGISTRANT.



## Registrant Information:

Name: \_\_\_\_\_

Year of Birth: \_\_\_\_\_

JHSC Member:

☐ Yes

☐ No

☐ Worker

☐ Management

**Shipping Address** (for virtual course materials where applicable):

Union & Local # (If applicable):

\_\_\_\_\_

\_\_\_\_\_

City/Province: \_\_\_\_\_

Union Position:

☐ Yes

☐ No

Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_

Work Phone/Extension: \_\_\_\_\_

Email: \_\_\_\_\_

Preferred Contact No.: ☐ Home ☐ Mobile ☐ Work

## Employer Information:

Contact Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City/Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Phone No./Extension: \_\_\_\_\_

Email: \_\_\_\_\_

WHSC Discount No. or Promo Code (if applicable): \_\_\_\_\_

## Course Information: Prices (per person) do not include 13% HST

☐ **Certification Part I** \$475.00

☐ **Working at Heights** \$125.00

☐ **Certification Part I - Virtual** \$475.00

☐ **Working at Heights Refresher** \$125.00

☐ **Certification Part II - General Stream** \$382.00

Date of Course: \_\_\_\_\_

☐ **Certification Part II - General Stream - Virtual** \$382.00

☐ **Certification Refresher** \$140.00

☐ **Certification Refresher - Virtual** \$140.00

☐ **OTHER**

☐ **GHS WHMIS - Virtual** \$10.00

Course Name: \_\_\_\_\_

Date of Course: \_\_\_\_\_

Date: \_\_\_\_\_

Cost: \_\_\_\_\_

## Payment Options: Please note we cannot process payments using pre-paid credit cards.

Cardholder Name: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

CVV: \_\_\_\_\_

Expiry: \_\_\_\_\_  
Month/Year

☐ VISA

☐ Master Card

☐ Amex

Please e-mail form to [contactus@whsc.on.ca](mailto:contactus@whsc.on.ca)

cope:343 May/26