

# Course Registration

## General Public

**Personal Information:** Please print your name as you would like it to appear on your certificate.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

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

Ext: \_\_\_\_\_

**Payment must accompany registration**       Visa       MasterCard       Amex.

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

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

E-Mail: \_\_\_\_\_

## Company Sponsored

P.O. #: \_\_\_\_\_

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

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Invoicing Address and Contact (if different)

\_\_\_\_\_

Course Name	Date(s)	Location	Student Name	Fee

\* Although cancellations are rare, advance notice will be given in the event that course has insufficient enrolment.

### Guidelines for Booking with St. John Ambulance

1. St. John Ambulance will charge the full course fee if reserved spaces are not cancelled or rescheduled five days prior to the course commencement. There is a \$10 fee for cancellations and \$5 fee for each transfer.
2. Certificates are issued upon completion of the course and receipt of payment. Invoices for corporate training are mailed one to two weeks after course completion.
3. It is important that students are ready to start on time and are able to commit to time frame set out for the full course.
4. Renewal courses require review of previous course material before course commences.

**I have read and understood the terms and conditions above:** \_\_\_\_\_

**FAX REGISTRATION FORM TO OAKVILLE-MILTON BRANCH**

**Fax: 905-469-9816 Phone: 905-469-9325**