

Enrollment Form INDIVIDUAL OWNER OPERATOR OHS TRAINING

This enrollment form is for online training. Access to the online training is available until December 31 of the current year.

Participant Information (complete fully and print clearly)								
Legal First Name		Legal Middle Name			Legal Last Name			
Nickname (if applicable)		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						
Company Information								
Legal Name of Company				Company Trade Name or "Operating As" Name				
WorkSafeBC Account Number	egistered with SAFE Companies certification program as an Individual Owner Operator?							
Work Activity (manual falling; mechanized harvesting; log hauling; engineering; other – please indicate)								
Course Fee (payment must accompany this enrollment)								
Self-directed Online Session: \$105.00 (includes 5% GST)								
Payment Method: 🗌 End	losed Cl	neque (payable	e to BC F	orest Safety Counc	cil) 🗌 V	ISA 🗌 Master	Card	
Name on Credit Card					Expiry Date (N	М, ҮҮ)		
Credit Card Number								
Cardholder's Signature								

Your company, personal and financial information is only used for purposes of course enrollment and SAFE Companies verification. 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 NOTE:			
 Email: safeco@bcforestsafe.org Fax: 250-741-1068 Mail: 8C – 2220 Bowen Road, Nanaimo, BC V9S 1H9 	If you are unable to do online training, please contact SAFE Companies at 1-877-741-1060 or <u>safeco@bcforestsafe.org</u> so that we can make alternate arrangements to accommodate your needs.			
	Questions? Call us toll-free: 1-877-741-1060			