

### Working Safely for the Health of it!

# **MOL Working at Heights Training**

# **Registration Form**

#### (Public Sessions at our Training Centre in Sudbury)

**Northern Safety Solutions Inc.** is pleased to offer our 1-day MOL Working at Heights Training. The session will be from 8:00 a.m. to 4:30 p.m. with a half hour lunch (on your own).

Training dates are December 6, 13, 20, 27, 2023.

#### Photo I.D. is required and must have closed toed shoes to attend training.

Please complete the following 2 Page Registration Form and fax or email back to our office to reserve your seat(s) Fax # (705) 566-4348 Email: info@nss4.com

Please indicate the requested training date:

(Training dates for our public sessions can be found on our website training calendar @ www.northernsafetysolutions.com)

Client Information:

Company Name:

Address: \_\_\_\_\_ City: \_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

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

 $(More\ than\ 2\ participants\ please\ provide\ names\ on\ a\ separate\ sheet\ and\ attach)$ 



### **Working Safely for the Health of it!**

#### **MOL Working at Heights Training Public Sessions**

The price per participant is \$199.00 + HST For Group Rates or Onsite Training please contact our office for a quote.

**Terms and Conditions:** Any cancellation received within 7 business days of the course date shall result in a refund of the training course minus a 5% administration fee if paid by credit card. All other cancellations, including in the event of a No-Show on the day of training, will result in a \$100.00 administration charge plus a 5% administration fee as an administration charge if paid by credit card.

NSS reserves the right to cancel or re-schedule a course. Registrants will be informed of any cancellations at least one week prior to course date. NSS' liability is limited to the registration fee.

Payment Terms: All payments made by cheque, please make payable to:

Northern Safety Solutions Inc.

Payments must be received at least one week prior to date of training session.

	P.O. #
Signature of authorized person	
	Now Accepting VISA MasterCard
Title	110W Recepting
	Credit Card Information
Date	** We do not accept Visa Debit **
	Cardholder Name
	Card Number
	Expiry Date
	CVC Code