



## Working Safely for the Health of it!

### Joint Health and Safety Certification Part One Registration Form

**Northern Safety Solutions Inc.** is pleased to offer our three day Ministry of Labour Basic Certification **Part One** for Joint Health & Safety Committees.

This session is to be held on August 21<sup>st</sup>, 22<sup>nd</sup>, 23<sup>rd</sup>, 2017 at the NSS Training Centre Sudbury, Ontario. The session will be from 8:00 am to 4:30 pm with a one (1) hour lunch on all 3 days (on your own). First day registration will begin at 7:45 am on August 21st, 2017.

*Please complete the following 2 page Registration Form for Basic Certification Part One and fax or e-mail the Registration Form back to our office immediately to reserve your seat(s)*

**Fax # (705) 566-4348 Email: [info@nss4.com](mailto:info@nss4.com)**

#### Client Information:

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

**WSIB Firm Number:** \_\_\_\_\_ **WSIB Rate Number:** \_\_\_\_\_

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

**Title:** \_\_\_\_\_ **Email:** \_\_\_\_\_

#### Company Address:

**Street** \_\_\_\_\_ **City** \_\_\_\_\_ **Postal Code** \_\_\_\_\_

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

**1<sup>st</sup> Participant** \_\_\_\_\_

**2nd Participant** \_\_\_\_\_

**Title/position** \_\_\_\_\_

**Title/position** \_\_\_\_\_

Northern Safety Solutions  
955 Bancroft Drive  
Sudbury Ontario, P3B 1P8  
Ph: 705-524-8189 Fax: 705-566-4348  
[northernsafetyolutions.com](http://northernsafetyolutions.com)



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**Ministry of Labour Basic Certification Part One for Joint Health & Safety Committees**

The price per participant is \$565.00 + HST

Terms and conditions: Any cancellations received within 7 business days of the course date shall result in a full refund of the training course. All other cancellations will result in a \$100.00 administration charge. NSS reserves the right to cancel or re-schedule a course. Registrants will be informed of any cancellations at least one week prior to the course start 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.*

\_\_\_\_\_  
*Signature of Authorized Person*

*P.O. #* \_\_\_\_\_

*Now Accepting*  

\_\_\_\_\_  
*Title*

**Credit Card Information**

*Cardholder Name* \_\_\_\_\_

*Card Number* \_\_\_\_\_

*Expiry Date* \_\_\_\_\_

\_\_\_\_\_  
*Date*

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