

TRANSPORTATION SAFETY PROFESSIONALS WORKSHOP REGISTRATION FORM

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780-865-0427

PARTICIPANT INFORMATION

Company Name

Address

City

Province

Participant Name

Professional Role/Position

Email Address

Phone Number

I understand that I must have some knowledge of National Safety Code requirements prior to attending this workshop.

I acknowledge that Alberta Transportation may send me a survey via email to gather additional feedback after the Transportation Safety Professionals Workshop.

DIETARY REQUIREMENTS

Vegetarian

Gluten Free

Diabetic

Other (please call)

REGISTRATION FEE \$600.00, plus tax, must be paid at time of registration to secure seat.

METHOD OF PAYMENT

Cheque

Mastercard

Visa

Name on
Credit Card

Billing Address of
Credit Card with
Postal Code

Credit Card
Number

Expiry
Date

CCV

Note: Where a participant has withdrawn/cancelled their registration for the workshop at least 15 days prior to the workshop date, the facilitator is required to refund the registration fee in full. Where cancellation/withdrawal occurs less than 15 days of the workshop date, the facilitator will only refund 50% of the fee. No-shows will not receive any portion of their registration fee.

For Office Use Only

() Payment in Full Attendance () Day 1 () Day 2 () Day 3

Certificate Issued ()