

COMPANY INFORMATION

COMPANY NAME:

CONTACT PERSON:

CURRENT POSITION:

Email:

COMPANY ADDRESS:

CITY:

PROVINCE:

POSTAL CODE:

PHONE NUMBER:

Member Status Member
 Associate Member
 Non-Member

*Associate Members are companies that are members of another Certifying Partner (i.e., ACSA, Enform, etc.)

COURSE INFORMATION

Course Requested

Address of Training Facility

Date(s) Requested

Names of Participants

AUDIO VISUAL SYSTEMS REQUIREMENTS

| | | | | | | | |
|------------------|-----|------------|-----|----------|-----|----------|-----|
| Screen/Projector | Yes | DVD Player | Yes | Speakers | Yes | Computer | Yes |
| | No | | No | | No | | No |

First Aid Course Specific: The recommended size of room for a First Aid class of 10 people would be 20' x 20' room. Minimum participants is 10.

ONSITE TRAINING COSTS *This section to be completed by MHSA staff*

Additional rates for onsite training are applicable to associate and non-members only. For more information on course fees, visit www.mhsa.ab.ca

| | | | |
|-----------------|-----|------|----|
| Travel Charge | Yes | Cost | No |
| Meals/ Per Diem | Yes | Cost | No |
| Hotel Expenses | Yes | Cost | No |
| Other | Yes | Cost | No |

Customized Courses

Email completed form to:

North: edmonton@mhsa.ab.ca

South: rockyview@mhsa.ab.ca