



Registration Form (Health and Safety Workshops)

All Students – Please Print Using a Ball Point Pen (Please make *any* necessary corrections/additions)

Year: 2007-2008	Mail to: The Close Group 4230 Greenwood Av N Seattle, WA 98103 Fax to: (206)782-1304 Questions? Call (206)782-1254
Health and Safety Workshops	
Name: Last: _____ First: _____ Middle: _____	
Permanent Address: Street: _____ City: _____ State: _____ Zip: _____ Employer: _____	
Email Address: _____	Phone: [day] _____ [eve] _____

Session Code	Workshop Title	AM/PM	Date	Tuition
A / B / C / D	Survive an OSHA/WISHA Inspection	AM		\$275
A / B / C / D	Create a Safety Program	PM		\$275
A / B / C / D	Records Keeping	AM		\$275
A / B / C / D	Industrial H&S: What every employer	PM		\$275
A / B / C / D	Intro to IH: Nuts and Bolts	AM		\$275
A / B / C / D	Managing Claims	PM		\$275
A / B / C / D	Accident Investigation	AM		\$275
A / B / C / D	Creating a Strong Safety Culture	PM		\$275

Payment Method

<p>Please Remember:</p> <p>P.O. Option: Student is responsible for charges until purchase order is processed. A copy of the PO should be attached.</p> <p>Please note: Tuition includes the cost of your workshop materials!</p>	<p>Payment Options: Choose one of the following methods (A or B). Payment or copy of the PO must be received <i>prior to the first class meeting</i> payable to: The Close Group.</p> <p>A μ Check (make payable to: The Close Group)</p> <p>B μ Purchase Order number _____ from _____ <small>(Name of school, district or organization)</small></p> <p style="text-align: center;"><small>(Payable upon receipt of invoice)</small></p> <p style="text-align: center;">_____ <small>(Organization Address)</small></p> <p>μ Please mail receipt for payment to address listed above (type or write alternative address below)</p> <hr/> <p>Send or email receipt for payment to:</p>
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1. Contractual Agreement

I understand and agree that when my registration is accepted by the Close Group, I have obligated myself to pay for the course and all other charges related to this registration. If I decide to cancel my registration, I will do so in writing (email is sufficient) to the Close Group. To receive full refund (less unrecoverable expenses such as books, materials and SPU registration fees) cancellation notice must be received prior to the 2nd class session. No refunds/withdrawals will be granted after this time.

<p>I request registration in the course indicated above and agree to abide by the contractual agreement.</p> <p>Signature _____ Date _____</p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;">Entered in computer</td> <td style="width: 33%;"></td> <td style="width: 33%; text-align: right;">For official use only</td> </tr> <tr> <td style="text-align: center;">Initials</td> <td style="text-align: center;">Date</td> <td style="text-align: right;">Postmarked Date</td> </tr> </table>	Entered in computer		For official use only	Initials	Date	Postmarked Date
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