



# Course Registration Form

Course Title: \_\_\_\_\_ Course Date: \_\_\_\_\_

Company/Organization Name: \_\_\_\_\_

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

Business Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Prov.: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Bus. Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

PARTICIPANT'S NAME	POSITION

## Method of Payment (Please check one)

VISA       MASTERCARD       CHEQUE (Please make payable to Echologics Engineering Inc.)

Card # \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Name on card: \_\_\_\_\_ Signature \_\_\_\_\_

*Please Print*

Payment Total (including 6% GST): \_\_\_\_\_

## Refund Policy

Up to two weeks prior to the course – 100% refund

Less than two weeks prior to the course– NO refund- 50% Credit towards future course

Participant substitutions are permitted up to and on the starting day of the program

**FAX REGISTRATION FORM TO: (416) 249-8833**

## OR MAIL TO:

Echologics Engineering Inc.

#165 - 50 Ronson Drive, Toronto, ON M9W 1B3

For more info phone: (416) 249-6124 or Toll Free: (866) 324-6564 or e-mail: [training@echologics.com](mailto:training@echologics.com)