



Safety Training

205, 12904 - 50 St., Edmonton, AB T5A 4L2 • Tel.: (780) 413-9282 • Fax: (780) 472-9599 • Email: safety@cslmanlifts.com

Group Enrolment Form for all CSL Training Programs

Employer's Name & Address

Employer's Name: _____	Purchase Order #: _____
Employer's Address: _____ _____	Authorized By: _____
City: _____ Prov: _____	Date of Class: _____
Postal Code: _____	First Choice: _____
Phone Number: _____	Second Choice: _____
	Fax Number: _____

PPE is required for all Safety Programs

Class Requested: (Please check one) Contractors AWP, Equipment Administration, Skid Steer Safety,
 Conventional Forklift, Reach Forklift, Contractors Fall Protection.

Please List Names of Participants:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

Notification of Cancellation: Due to the overall demand for class space, submission of this document is considered a commitment of attendance. Failure to advise CSL Safety Training of the cancellation 24 hours prior to class date will result in a charge of \$50.00 per registered person. Please phone your cancellations in to our office at (780) 413-9282 or (780) 701-2110 (Larry's Direct Line)

Do you belong to any Professional Organizations or Trade Unions? _____

Check Box if you would not like to receive information about upcoming training class and Safety News



A Customer First Company

CSA & OH & S Approved Course
Small Classroom Size

Multi Language Course
Aerial Work Platforms

Familiarization Training
Fall Protection