

UNBC Continuing Studies - WILDLIFE DANGER TREE REGISTRATION FORM

COURSE INFORMATION - WILDLIFE DANGER TREE ASSESSOR CERTIFICATION

<input type="checkbox"/> Forest Harvesting & Silviculture	Course Date	<input type="checkbox"/> Recertification/Upgrade
<input type="checkbox"/> Wildland Fire Safety	Location	Course Fee
<input type="checkbox"/> Parks & Recreation		GST --- EXEMPT ---
<input type="checkbox"/> I have read and meet the pre-requisites for this course.		Total Payable
<input type="checkbox"/> I authorize release of my contact information to contractors looking to hire assessors.		

STUDENT INFORMATION

NOTE: The following must be your legal names for use on all official UNBC documentation

Last/Family Name									
Legal First Name						Middle Initial			
Former Name (if applicable)									
Preferred First Name									
Birthdate and gender are MANDATORY for identification and statistical purposes.									
Date of Birth (eg: 14 MAY 1980)	D	D	M	O	N	Y	Y	Y	Y
Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>								
UNBC Student Number (if known)									

COMPANY INFORMATION

(if registering through work)

Company Name			
Branch			

COMPANY MAILING ADDRESS

Address 1			
Address 2			
City or Town			
Province		Postal Code	

Telephone Number			
Fax Number			
Email Address			

Please provide a valid email address as it will be used for course confirmations.

HOME MAILING ADDRESS

NOTE: ALL UNBC correspondence will be delivered to this address

Address 1			
Address 2			
City or Town			
Province		Postal Code	

Telephone Number			
Email Address			

Please provide a valid email address as it will be used for course confirmations.

KEY CONTACT (If applicable)

Please complete this section if someone other than the student is completing the registration form.

Name			
Telephone Number			
Email Address			

PAYMENT INFORMATION - PLEASE NOTE: All registrations must be accompanied by payment.

<input type="checkbox"/> Cheque (made payable to "UNBC Continuing Studies")	<input type="checkbox"/> VISA	<input type="checkbox"/> Cash (in person only)
<input type="checkbox"/> Money Order (Canadian Funds Only)	<input type="checkbox"/> Master Card	<input type="checkbox"/> Debit (in person only)
<input type="checkbox"/> American Express		

Card Number			Expiry Date	
Cardholder Name			Signature	