

Registration Form

Course Date		Location	
Participant Information			
Name		E-Mail	
Address			
City		Province	
		Postal Code	
Phone No.		Company	
Payment Information			
Fee (\$) *		Taxes (\$)	
		Total (\$)	
<p style="text-align: center;">Credit Card (VISA/MasterCard)</p> <p>Card Number:</p> <p>Name on Card:</p> <p>Expiry Date (Month/Year):</p>		<p style="text-align: center;">Cheque Enclosed Payable to the United Food Safety Group</p> <p style="text-align: center;">Company PO Number:</p> <p style="text-align: center;">I would prefer a different payment method:</p>	

** Fees listed include all course materials and a Certificate of Completion, applicable taxes not included.*

To register, please complete and return this form by Email, mail or fax, we will send you an Email upon receipt of your application.

E-mail: Registration@unitedfoodsafety.com

Fax: 1-800-979-2877

Mail: United Food Safety Group / Course Registration
5800 Ambler Drive, Suite 210, Mississauga, ON L4W 4J4

Thank you for your registration!