

Registration Form

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

** 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!