



# GAMBIT INDUSTRIAL

SAFETY SOLUTIONS LTD.

**Course Name:** Part One Basic Certification 2025

**Course Length:** 19.5 Hours

**Course Time:** 8:30am – 4:00pm

**Cost per person:** \$495 plus HST

Registration Details – Please **PRINT** Clearly

- All areas marked with an \* must be completed or registration **will not** be processed.
- You can email this registration form to  
Lisa.Leduc@gambitsafety.com  
Or  
Fax 519-763-7301

Group discounts available for groups of 4 or more.  
Please call our office for more details.

Company Name: \_\_\_\_\_

\* Contact Name: \_\_\_\_\_ \*Email: \_\_\_\_\_

\*Company Address: \_\_\_\_\_

\*City: \_\_\_\_\_ \*Province: \_\_\_\_\_ \* Postal Code: \_\_\_\_\_

\*Telephone: \_\_\_\_\_ Ext. \_\_\_\_\_

This course is offered on the following dates. Please select the session you would like to attend.

\*\*Please note this course is a three day course and will be held once a week over three weeks\*\*

Jan. 8, 15 & 21

March 5, 12 & 19

May 7, 14 & 21

July 9, 16 & 23

September 10, 17 & 24

November 5, 12 & 19

Please use the table below to indicate the name(s) of the Participant(s) that will be attending.

\*Participant Name: \_\_\_\_\_ \* Participant Name: \_\_\_\_\_

\*Participant Name: \_\_\_\_\_ \*Participant Name: \_\_\_\_\_

## Cost Calculations

\* Number of Attendees \_\_\_ x \$495 \_\_\_\_\_

\*HST 13% \_\_\_\_\_

\*Total \_\_\_\_\_

## Payment Details

Credit Card Number: \_\_\_\_\_

Expiry: \_\_\_/\_\_\_ CV#: \_\_\_\_\_

Postal Code of Billing Address: \_\_\_\_\_ - \_\_\_\_\_