

BRSA OSHA 30 for GENERAL INDUSTRY Registration Form

Authorized OSHA Instructor: Tom Boxler

Dates: March 4th, 11th, 18th and April 1st

Please scan/email to Lara Hoke: larahoke2@ntelos.net (one form per participant)

Name _____ Title _____

Company Name _____ Address _____

City _____ State _____ Zip Code _____ Phone _____

E-mail _____ BRSA Member: Yes _____ No _____

Registration Fee: \$350 per participant

Total: \$ _____

Please note dates and locations for each training session. Each day is from 8am-5pm:

March 4th Nibco – 131 Johnson Drive, Stuarts Draft

March 11th Tenneco – 3160 Abbott Lane, Harrisonburg

March 18th Pactiv – 149 Grand Caverns Drive, Grottoes

April 1st Nibco – 131 Johnson Drive, Stuarts Draft

Course Attendance: Students are **required** to attend all sessions/length of course. Those who do not attend the entire length of the course will not receive a course completion certificate/card. Students are required to sign in upon arrival and after returning from lunch each day. Please provide a brief description of your safety responsibilities (to help customize the elective portions of the course:

Lunch will be provided. Please indicate any special dietary needs here:

Paying by check? Make checks payable to: **Blue Ridge Safety Association**, One Solutions Way, Waynesboro, VA 22980

Paying by credit card – please complete credit card authorization information below.

Credit Card Authorization Information: This information is confidential. This form will only be kept by the Blue Ridge Safety Association. Please print, complete and mail with any applicable documentation for registration to Blue Ridge Safety Association, One Solutions Way, Waynesboro, VA 22980. You may also scan/email to larahoke2@ntelos.net Incomplete forms may be returned for completion which will delay processing (Please Print Legibly)

Credit Card Authorization Information:

Company Name: _____

Name Listed on Credit Card: _____

Cardholder Billing Address: _____

City: _____ State: _____ Zip Code: _____

Contact Daytime Phone Number: () _____ - _____

Credit Card Type: Visa _____ MasterCard _____ Discover _____ American Express _____ (check only one)

Credit Card # _____ 3 Digit Security Code on Back _____

Expiration Date: _____ / _____ (month/year) Authorized Payment Amount: _____

Cardholder Signature: _____ Date: _____

I certify that I am the authorized holder and signer of the credit card referenced above. I certify that all information provided is complete and accurate. I hereby authorize the Blue Ridge Safety Association to process payment for all charges as indicated above.

**Please note that receipt of OSHA wallet card after completion of training can take up to 4 months for processing.*

Refunds: Cancellations must be submitted in writing before close of business Monday, February 29th in order to receive a refund. An administrative fee of \$25 will be charged for cancellations. Substitution of attendees is allowed but notification must be made by close of business on Monday, February 29th. "No shows" will not receive a refund.