



COURSE REGISTRATION FORM

complete all fields and fax to (905) 829-8890 or Email to carlaa@xcg.com

PLEASE PRINT CLEARLY

Tel: _____

Employer _____

Contact Name _____ Title _____

Billing Address _____

City _____ Province _____ Postal Code _____

Email _____

Fees: \$315 (1 day) \$630 (2 day) \$950 (3 day) \$1150 (4 day) \$1435 (5 day) Please enquire about group rates

Student Name: _____ WWOCS ID # 900

Course Code: _____ Course Name: _____

Course Location: _____ Course Date: _____

Student Name: _____ WWOCS ID # 900

Course Code: _____ Course Name: _____

Course Location: _____ Course Date: _____

Student Name: _____ WWOCS ID # 900

Course Code: _____ Course Name: _____

Course Location: _____ Course Date: _____

Student Name: _____ WWOCS ID # 900

Course Code: _____ Course Name: _____

Course Location: _____ Course Date: _____

XCG will invoice you in the week training takes place. You may reference a P.O. # here: _____

If you would like to use a credit card, please provide the number below:

_____ Expiry Date: _____

Total Fees _____ **+ HST (13%)** _____ **Grand Total** _____

Please make cheque payable to XCG Training & Operations Inc., 2620 Bristol Circle Suite 300, Oakville, ON L6H 6Z7. For Info or questions, please call 1-866-285-5827 or 905-829-8880

Proof of CEUs or certificates will not be provided until payment is received. Payment may be made by check, money order, credit card. Refund policy- Minimum 14 business days prior: 100% refund. Minimum 6 business days prior: 100% credit towards another course. Substitutions are permitted at any time. XCG Training maintains the right to cancel or change date or location of its events.