

Certificate of Recognition™ Training Registration Form



Completion of the 5 day Certificate of Recognition™ training program is the first step in the COR™ Certification process. Organizations completing the full 5 day program for the first time, will be issued a Letter of Good Standing indicating that they are “In Process” in the COR™ Program. In order to be eligible for a Letter of Good Standing a company must be a Member or Associate Member of the NLCSA.

Please complete and return this form to the NLCSA prior to course date. Course fees must be paid in full prior to registration.

COMPANY INFORMATION (Please Print)

Name: _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Phone Number: _____ Fax Number: _____

WHSCC Firm N#: _____ NIC Code: _____

(Please attach proof of WHSCC Firm # and NIC Code)

STUDENT INFORMATION (Please Print)

FIRST NAME MIDDLE INITIAL LAST NAME

DATE OF BIRTH (to ensure record integrity) _____
YEAR/MONTH/DAY

PERSONAL MAILING ADDRESS: _____

CITY/TOWN: _____ PROVINCE: _____ POSTAL CODE: _____

PHONE (H): _____ PHONE (C): _____

Personal information is collected to ensure accuracy of training records and will not be released under any circumstances to third parties.

Please indicate which Certificate of Recognition™ course you would like to be registered for:

Date: _____ **Location:** _____

Please return to NLCSA by fax (709) 739-7001 or email info@nlcsa.com

We require 48 hours (two business days) notice for cancellation of training or charges will be incurred.