



Individual Course Registration Form

Thank you for choosing St. John Ambulance as your First Aid provider.

		Today's Date:	
Company Name:	Girl Guides of Canada- NS Members		
Company Address:	32 Glendale Ave unit 1, Lower Sackville, NS B4C 3M1		
Email:	ns-executiveassistant@girlguides.ca	Cell Phone:	
Billing Information (if different from company information)			
Billing Address:	as above		
Bill to Account:	Girl Guides - NS	Billing Contact Name:	
Email:	ns-ap@girlguides.ca	Work Phone:	

Contact Name: District Organizer	District Organizer Cell #	Contact District Organizer email:
Name & Address re: certificate to be mailed		

Student's Name:			
Address:			
Cell:		Phone:	
Email:			

Course Information			
Class Type: <small>ie: Emergency CPC (1) or Standard CPC (2 day) All In- classroom or Blended Theory Online</small>			
Other: (if not listed)		Class Location:	
Class Start Date (1 st Choice)		Class Start Date: (2 nd choice)	
Additional Notes			

PLEASE READ- CANCELLATION POLICY:

- > All registration fees are 100% non refundable
- > Cancellations received with 6 or more business days notice, prior to the class start date, are permitted to transfer to a new date with no fee.
- > Cancellations received within 3-5 business days prior to the class start date are permitted to reschedule to a new date with a transfer fee of \$25 plus tax.
- > Cancellations received 1-2 business days prior to the class start date are non-transferable.
- > No-shows are non- transferable

