

REGISTRATION FORM

8180 Siegen Lane - Baton Rouge LA 70810
bgordon@safetylca.org
 Phone: (225)766-0955, ext. 3289
 Fax: (225)766-1099 (Attn: Beth Gordon)
 Web Page: www.coss.net

COSS Registration Rates:
 Members: \$1699 per person
 Non Members: \$2199 per person

Registrant's Company _____ Person Authorizing This Training: _____
 Registrant's Mailing Address _____ City, State, Zip _____
 Registrant's Email Address _____ Registrant's Phone # _____

Authorized Signature (Required): _____ **Date:** _____

This authorized signature verifies that services rendered will be paid for in full by the registrant and/or the registrant's company, via one of the payment methods below:

PAYMENT TYPE:(Circle one) Company Check (Check must accompany registration form; Personal Checks not accepted) ***Invoice** (**must be a member with invoicing approval*)

Credit Card Credit Card Number _____ - _____ - _____ Exp. Date ____ / ____ Name On Card (Print) _____

Students must have valid ID and be at least 18 years of age to enter class. All COSS cancellations must be made by 5:00 p.m. on Tuesday of the week prior to the class start date. A charge of 25% of the cost will be assessed to no-shows, or students who do not cancel prior to 5:00 p.m. on Tuesday of the week prior to the class start date. Cancellations must be in writing and may be faxed to (225) 766-1099 (Attn: Beth Gordon) or emailed to bgordon@safetylca.org. All COSS students must have a high school diploma or equivalent.

***** PLEASE CHECK IN AT THE FRONT WINDOW 30 MINUTES PRIOR TO CLASS ON MONDAY*****

Course Title, Time, Location and Room Number: Certified Occupational Safety Specialist 8:00 a.m. Sharp Safety Council, Room 7 (unless otherwise informed)

SOCIAL SECURITY # (optional)	FIRST NAME	LAST NAME	COURSE CODE	CLASS DATE	CLASS TIME	PO# <small>(if applicable)</small>	JOB# <small>(if applicable)</small>	TRADE
____ - ____ - ____			12COSS		8:00 a.m.			
____ - ____ - ____			12COSS		8:00 a.m.			
____ - ____ - ____			12COSS		8:00 a.m.			
____ - ____ - ____			12COSS		8:00 a.m.			
____ - ____ - ____			12COSS		8:00 a.m.			

This section is for internal use only:

Date Rec'd: _____ Confirmed By: _____