

CCAA VIRTUAL WORKSHOP Registration Form

VIRTUAL WORKSHOP DETAILS

COURSE NAME	Virtual Workshop Date	CCAA Partner			Others		
		QTY	PRICE	TOTAL	QTY	PRICE	TOTAL
Corrective Actions Plan (CAP)			\$520.00			\$650.00	
Quality Assurance Manager (QAM)			\$520.00			\$650.00	
Company Aviation Safety Officer (CASO)			\$520.00			\$650.00	
Safety Management Systems Manager (SMS)			\$520.00			\$650.00	
Quality Systems Auditor (QSA)			\$680.00			\$850.00	
Aviation Occupational Health & Safety (AOSH)			\$520.00			\$650.00	

MAIN CONTACT & PARTICIPANT(S) INFORMATION

Main Contact Person: First Name/ Last Name			
Organization		CCAA Partnership Number	
Organization Address	City	Province	Postal Code
Phone	E-mail		
List of Participant(s): FIRST NAME / LAST NAME and EMAIL ADDRESS			

PAYMENT DETAILS

Credit Card	
<input type="checkbox"/> VISA	<input type="checkbox"/> MasterCard <input type="checkbox"/> American Express
Credit Card Number	Expiry Date
Name of Card Holder	Signature
Billing Address: (If different from the previously stated address on page 1)	

PLEASE RETURN THE COMPLETED FORM TO:

Sohini Famili
 Manager, Skills Development & Partnerships
sfamili@avaerocouncil.ca /Phone: (613) 727 8272 x 232

