

CCAA VIRTUAL WORKSHOP Registration Form

VIRTUAL WORKSHOP DETAILS

	Virtual Workshop Date	CCAA Partner			Other		
COURSE NAME		QTY	PRICE (tax not included)	TOTAL	QTY	PRICE (tax not included)	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

PAYMENT DETAILS						
Credit Card						
□ VISA □	MasterCard	☐ 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

