



AORS

PROMOTING KNOWLEDGE. PURSUING EXCELLENCE.

TRAFFIC CONTROL BOOK 7 ONLINE LIVE WEBINAR TRAINING SESSIONS ONE FULL DAY COURSE, 8 am to 3 pm

PLEASE PRINT CLEARLY

<input type="checkbox"/> May 12, 2022	<input type="checkbox"/> June 14, 2022	<input type="checkbox"/> July 14, 2022	<input type="checkbox"/> August 11, 2022	<input type="checkbox"/> October 5, 2022	<input type="checkbox"/> Nov. 10, 2022
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Please indicate \checkmark which online live webinar course you will be attending:

SEMINAR REGISTRATION

MUNICIPALITY / EMPLOYER: _____

MAIN CONTACT NAME: _____

BILLING ADDRESS: Street Number & Name _____

PO BOX NUMBER (IF APPLICABLE): _____

CITY: _____

POSTAL CODE: _____

MAIN CONTACT'S EMAIL: _____

MAIN CONTACT'S PHONE #: _____

FAX: _____

****THE MAIN CONTACT PERSON WILL BE EMAILED COURSE MATERIAL AND ONLINE MEETING LINK TO DISTRIBUTE TO ALL PARTICIPANTS.**

PRINT A SHEET FOR ADDITIONAL ATTENDEES

ATTENDEE NAME: _____

JOB TITLE & DEPARTMENT: _____

1.

EMAIL: _____

PHONE #: _____

2.

EMAIL: _____

PHONE #: _____

3.

EMAIL: _____

PHONE #: _____

4.

EMAIL: _____

PHONE #: _____

5.

EMAIL: _____

PHONE #: _____

SEMINAR FEE:

Member rate \$170 + HST = **\$192.10** per person x

Attendees = TOTAL FEE: \$

Non-Member rate \$195 + HST = **\$220.35** per person x

Attendees = TOTAL FEE: \$

This includes electronic version of all learning materials. (HST #12442 6115 RT)

PAYMENT METHOD \checkmark : CHEQUE (Payable to **Association of Ontario Road Supervisors**) Payment must be received before course begins

IF PAYING BY CREDIT CARD, please indicate \checkmark one: MasterCard VISA (AORS only accepts M/C & Visa)

Card # _____

Name on Card _____

Exp. Date _____ CVV# _____

Signature _____

Once form is complete, submit by email to admin@aors.on.ca

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