

# Class Registration Form

## Important Contact Numbers

<i>OSH Director</i> 904-399-3119 ext. 121	<i>OSH Manager</i> 904-399-3119 ext. 124	<i>OSH Assistant</i> 904-399-3119 ext. 142	<i>Member Representative</i> 904-399-3119 ext. 127
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## Northeast Florida Safety Council, Inc.

Occupational Safety & Health  
1725 Art Museum Drive  
Jacksonville, Florida 32207

[www.jaxsafety.com](http://www.jaxsafety.com)

### CLASS REGISTRATION FORM

PHONE: (904) 399-3119 Ext: 142

FAX: (904) 399-8001 ATTENTION: OSH DEPARTMENT

E-mail Form to: [osh-registration@nefsc.org](mailto:osh-registration@nefsc.org)

To enroll in classes, please fill out the form below. Please print all information legibly.

### Student Name(s) Class Date

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Company Name \_\_\_\_\_

Registered By: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Purchase Order #: \_\_\_\_\_

Billing Address: \_\_\_\_\_

**If Confirmation of Enrollment is Required Please Check Box**

Payment is required regardless of attendance without prior day notification of cancellation  
Members of the Northeast Florida Safety Council may be billed for classes. Non-member companies must pre-pay.

### Acceptable forms of payment: credit card and/or company check

To pay by credit card for the above employee(s), simply fill out the form below: Note: Card will be only be processed upon student(s) arrival. Card numbers are not kept on file.

Type of Card \_\_\_\_\_ Card Number \_\_\_\_\_  
Name on Card \_\_\_\_\_ Exp. Date: \_\_\_\_\_