



SAFETY COURSE REGISTRATION FORM

Company: _____ Contact: _____

Address: _____

City _____ State: _____ Zip: _____

Phone: _____ Email: _____

PLEASE ENROLL THE FOLLOWING EMPLOYEES:

Name	Class	Dates
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____

I understand that all attendees must bring a valid photo ID and that every ID will be photocopied for verification and recordkeeping purposes. No card/certificate or refund will be issued if attendee does not have ID.

Please complete and return form with check by mail to:

**Construction Exchange of Buffalo & WNY
2660 William Street
Cheektowaga, NY 14227**

Paying by credit card? Email form to cbuske@conexbuff.com and Cyndie will contact you for payment information. **All registrations must be accompanied with payment.**

Visit http://www.conexbuff.com/safety_schedule.php for course schedule and prices or call 716.874.3435 and speak with Cyndie with any questions.

Courses may be rescheduled or cancelled if minimum registration requirements are not met. No shows and cancellations will be charged full price unless five business days advance notice is received.