



# Aquatic Course Request Form

Contact Person: \_\_\_\_\_

Organization: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Email: \_\_\_\_\_

Work Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ Website: \_\_\_\_\_

## 1. Course Requested\*

- Pool Operator Level 1 (14-16hrs over 2 days)
- Pool Operator Level 2 (12-14hrs over 2 days)
- PoolSafe BC (8hrs)
- Pool Operator Level 1 or 2 plus PoolSafe BC (18-20hrs over 3 days)

*\*all courses allow for min. 10 or max. 20 participants*

## 2. Date(s) Requested (in Order of Preference):

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_

## 3. Timing Requested (in Order of Preference - ex. Fri 9am-5pm):

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_

4. Is the Course(s) open to the public?  Yes  No

If yes, what is the registration information?

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Location if different from above: \_\_\_\_\_

Price/Person: \_\_\_\_\_