



BC RECREATION & PARKS ASSOCIATION Professional Development & Initiatives Course Request Form

Contact Person: _____
 Organization: _____ Position: _____
 Org Address: _____ City: _____
 Province: _____ Postal Code: _____ Email: _____
 Work Number: _____ Fax Number: _____ Website: _____

1. Course Requested

Course		Duration*	Min/Max	Request
Aquatics	Pool Operator Level 1	14-16 hours (2 days)	10/20	<input type="checkbox"/>
	Pool Operator Level 2	14-16 hours (2 days)	10/20	<input type="checkbox"/>
	PoolSafe BC	8 hours	10/20	<input type="checkbox"/>
	Pool Operator Level 1 or 2 plus PoolSafe BC	18-20 hours (3 days)	10/20	<input type="checkbox"/>
Parks	Risk Management	8-16 hours (1-2 days)	15/20	<input type="checkbox"/>
	Playground Safety Awareness Course	8 hours	10/20	<input type="checkbox"/>
Access	Everybody gets to play™	8 hours	10/25	<input type="checkbox"/>
Youth	Strategies for Challenging Behaviours	4-8 hours	6/12	<input type="checkbox"/>
HIGH FIVE®	To request a High Five Workshop please go to: High Five Website - Training Request If your organization is new to High Five, open an account first at: High Five Website - Add an Organization			

*all course durations include time for breaks

2. Date(s)/Timing Requested (in order of preference):

Date	Time
1.	
2.	
3.	

4. Is the course open to the public? Yes No

If yes, provide registration information:

Training Address: _____ City: _____

Email: _____ Website: _____

Phone: _____ Registration Fee: _____

Send Completed Form to:
 Professional Development & Initiative Coordinator at
education@bcrpa.bc.ca
 #301-470 Granville Street, Vancouver, BC V6C 1V5 Tel:
 604-629-0965 ext 229 www.bcrpa.bc.ca