

FLIGHT/TRAVEL SAFETY PROGRAM REGISTRATION FORM

IN- FLIGHT SAFETY AND EMERGENCY EVACUATION PROCEDURES

DATES: JANUARY 14, 2010 0830 – 1630 hrs

LOCATION: Best Western Otonabee Inn 84 Lansdowne St., Peterborough, Ontario

Name: _____

Address: _____

City: _____ Postal Code:/ZIP _____ Country _____

Phone: _____ - _____ Email: _____

Company/Organization Name: _____

Position: _____

Cost of Program: \$ 395.00

Method of payment: 0 VISA 0 MC 0 Cheque (Enclose with Registration)

Credit Card Information

Credit Card No. _____ Expiry date _____

Name on Card: _____

Signature _____

Cheques payable to: Angels of Flight Canada Inc.

**Register by: 0 Fax 705 741-5147
0 Phone 705 743-5433 1 800 563-7686
0 Mail: Angels of Flight Canada Inc.
10 – 799 O'Brien Drive,
Peterborough, ON Canada K9J 6X7**

Check web site for updates at www.challengesofinflightssafety.com

IN – FLIGHT SAFETY AND EMERGENCY EVACUATION