

**FAX # 416-344-3493 OR E-mail: SCIPTraining@wsib.on.ca**

WSIB Account Number		WSIB Firm Number		Number of Workers	
Do you have other WSIB account numbers? <input type="checkbox"/> yes <input type="checkbox"/> no		If yes, specify:			
Company's Legal Name			Company's Trade Name		
Address		City/Town		Province	Postal Code
Telephone	Fax		Business/Trade Association (if applicable)		
Participant 1 (Owner) *		Job Title		Business Email	
Participant 2 Name *		Job Title		Business Email	
Indicate training location and dates that you prefer: Location: _____ Dates: _____					

**\*Participation is limited to 2 people per company.**

<b>TERMS AND CONDITIONS OF PARTICIPATION</b>	<b>Initials</b>
<b>1.</b> The participant is the owner or senior manager** of the company (see definition below).	
<b>2.</b> The owner or senior manager must attend both sessions.	
<b>3.</b> Employer premiums must be \$90,000 or less.	
<b>4.</b> Employer's WSIB account must be in good standing (paid up to date).	
<b>5.</b> An employer who experiences a traumatic fatality while participating in the program will be disqualified from receiving the program rebate.	
<b>6.</b> Employer cannot be currently registered in the Safety Groups program or have received SCIP NSB/ Building Health and Safety Awareness rebate in the past.	
<b>7.</b> Participants may be asked to complete questionnaires, surveys or interviews as part of the ongoing program evaluation.	

Owner/Senior Manager's Signature	Date (dd/mmm/yyyy)
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**\*\* Definition of senior manager:** The key decision-maker within the company who is responsible for approving the allocation of resources on behalf of the company (people, equipment, training, and materials).

**Please return this form by e-mail, fax or mail to:**

Workplace Safety and Insurance Board  
Workplace Health and Safety Services Division  
200 Front Street West, 11th Floor  
Toronto, ON M5V 3J1  
Attention: June Harris

**Telephone:** (416) 344-4077 OR 1-800-387-0750, ext. 4077

**TTY:** 1-800-387-0050

**Fax:** (416) 344-3493

**Email:** SCIPTraining@wsib.on.ca