



BC RECREATION & PARKS ASSOCIATION

Parks & Recreation 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	10/200	<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"/>
HIGH FIVE®	<p>To request a High Five Workshop please go to: High Five Website - Training Request</p> <p>If your organization is new to High Five, open an account first at: High Five Website - Add an Organization</p>			

**all course durations include time for breaks*

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

Date	Time
1.	
2.	

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

If yes, what is the registration information?

Training Address: _____ City: _____

Email: _____ Website: _____

Phone: _____ Price: _____

Send Completed Form to:
 Parks & Recreation Program Coordinator at parksandrec@bcrpa.bc.ca
 301, 470 Granville Street, Vancouver, BC V6C 1V5
 Tel: 604-629-0965 Fax: 604-629-2651
www.bcrpa.bc.ca