

Enrolment Form for Small Business Advisory Service Canadian Automatic Merchandising Association – CAMA



This service is meant to help you get started, with support and advice from someone knowledgeable in health and safety. Our intent is to help you with your Health and Safety Program and raise awareness. Once registration is confirmed for this service, an advisor will be assigned to meet with you to get started.

Please email or fax your completed form to:

WORKPLACE SAFETY & PREVENTION SERVICES
Denise Lam, CHRL
Account Manager – Small Business Ontario
Telephone 416-679-9558 Email denise.lam@wspss.ca

Company Name		Owner's Name	
Business Address		Business Telephone Mobile (alternate #)	
City		E-mail:	
Province	Postal Code	Best Time to connect	<input type="checkbox"/> Morning <input type="checkbox"/> Afternoon
Program Eligibility(Less than 20 employees)		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Type of Business =			
Regular Business Hours =			
FOR WSPS USE ONLY			
Completed forms to WSPS will be reviewed for final validation and matching with Volunteer Advisor			
Partnering the Business Owner and the WSPS Volunteer Advisor			
Match _____	Additional Notes		
Volunteer Name _____			
Agreed Start Date _____			
Total # of hours _____			
Program Completions Date - by Volunteer Program Lead – Menaka Kulendram			
Survey date _____			