

# Workers' Compensation and Workplace Safety Webinar Registration Form

The form may be e-mailed to [BocSeminars@MyFloridaCFO.com](mailto:BocSeminars@MyFloridaCFO.com) or faxed to 239-338-2786.

**1. NAME OF INDIVIDUAL ATTENDING (As you want it to appear on the Certificate of Completion)**

<b>First</b>	<b>Initial</b>	<b>Last</b>	<b>Suffix(Jr. Sr.)</b>

**2. BUSINESS INFORMATION:**

<b>Business Name:</b>			
<b>Street Address:</b>			
<b>City:</b>			
<b>State:</b>	<b>Zip Code:</b>	<b>Phone #:</b> -     -     -	<b>Fax #:</b> -     -
<b>E-mail Address:</b>			

**3. LICENSE INFORMATION:**

(For CEU reporting to the Department of Business & Professional Regulation; CILB & ECLB licenses only; 1 CEU awarded per course)

<input type="checkbox"/> Construction Industry Licensing Board	<input type="checkbox"/> Electrical Contractors Licensing Board
CILB Provider Number: 0004354	ECLB Provider Number: 0004684
Workers' Comp # 10118; Workplace Safety # 10630	Workers' Comp # 8264; Workplace Safety # 8263
<b>Type of License:</b>	<b>License #:</b>
<b>Name of License Holder:</b>	<b>Eff. Date:</b> <b>Exp. Date:</b>

**Successful completion of a TEST immediately following the class** is required for processing of the CEU credit.

**4. PLEASE IDENTIFY THE WEBINAR(S) FOR WHICH YOU ARE REGISTERING:**

<input type="checkbox"/>	<b>Workers' Compensation</b>	<b>January 10<sup>th</sup>, 2018</b>	<b>2:00 – 3:00 pm</b>	<input type="checkbox"/>	<b>Workplace Safety</b>	<b>January 11<sup>th</sup>, 2018</b>	<b>2:00 – 3:00 pm</b>
<input type="checkbox"/>	<b>Workers' Compensation</b>	<b>February 14<sup>th</sup>, 2018</b>	<b>2:00 – 3:00 pm</b>	<input type="checkbox"/>	<b>Workplace Safety</b>	<b>TBD</b>	<b>2:00 – 3:00 pm</b>
<input type="checkbox"/>	<b>Workers' Compensation</b>	<b>March 21<sup>st</sup>, 2018</b>	<b>2:00 – 3:00 pm</b>	<input type="checkbox"/>	<b>Workplace Safety</b>	<b>March 22<sup>nd</sup>, 2018</b>	<b>2:00 – 3:00 pm</b>
<input type="checkbox"/>	<b>Workers' Compensation</b>	<b>April 4<sup>th</sup>, 2018</b>	<b>2:00 – 3:00 pm</b>	<input type="checkbox"/>	<b>Workplace Safety</b>	<b>April 5<sup>th</sup>, 2018</b>	<b>2:00 – 3:00 pm</b>
<input type="checkbox"/>	<b>Workers' Compensation</b>	<b>May 23<sup>rd</sup>, 2018</b>	<b>2:00 – 3:00 pm</b>	<input type="checkbox"/>	<b>Workplace Safety</b>	<b>May 24<sup>th</sup>, 2018</b>	<b>2:00 – 3:00 pm</b>
<input type="checkbox"/>	<b>Workers' Compensation</b>	<b>June 13<sup>th</sup>, 2018</b>	<b>2:00 – 3:00 pm</b>	<input type="checkbox"/>	<b>Workplace Safety</b>	<b>June 14<sup>th</sup>, 2018</b>	<b>2:00 – 3:00 pm</b>

A separate form is required for each person attending the webinar, although, you may submit one form for multiple webinars.  
Please write clearly and complete the form as applicable.