

**CANADIAN SOCIETY OF SAFETY ENGINEERING
THOMPSON OKANAGAN CHAPTER**

INVITATIONAL FIRST AID COMPETITION

The Canadian Society of Safety Engineering (CSSE) Thompson Okanagan Chapter is inviting you to participate in the 23rd annual Invitational First Aid Competition being held in Kamloops on Saturday, September 26, 2015. The competition location is yet to be determined. A banquet will be held in the evening to announce 1st, 2nd, and 3rd place teams, Best First Aider and Best Captain. The banquet location will be announced shortly as well.

The competition is open to all levels of first aid (with or without current tickets), however, the judging criteria will follow the OFA Level 3 protocols. The teams are to consist of 4 members.

If you are interested in entering a team in this event, please return the attached entry form along with the registration fee of \$225.00, or at least the confirmation of a team, on or before July 30, 2015. Note: Application form AND fee to be received before date or another team will be given the opportunity to compete. There will be no refunds.

This is a first application forms received, first-in basis with only 10 teams allowed.

The draw of the teams will be done in the lock-up at 7:30 am on the morning of the event. This will be done at the designated competition location. Personal first aid supplies are acceptable, A LEVEL 1 FIRST AID KIT PER TEAM is to be supplied by each team and all other first aid equipment will be supplied to the teams.

If you are unable to submit team member names at this time, they may be provided at a later date.

If you require any additional information, please contact Elaine Wolfson, Coordinator at phone/fax: (250) 374-0058 or cell number (250)319-2418. (Thompson Nicola Training) email:ewolfsonntnt@telus.net

SEE YOU THERE!

**Canadian Society of Safety Engineering
Invitational First Aid Competition
Saturday, September 26, 2015
Kamloops, B.C.**

ENTRY FORM

TEAM NAME: _____

TEAM REPRESENTATIVE: _____

HOME PHONE: _____ **BUS. PHONE:** _____ **FAX:** _____

E-Mail: _____

ADDRESS: _____

_____ **Postal Code** _____

TEAM MEMBERS:

NAME	ADDRESS	PHONE
1. CAPTAIN		
2.		
3.		
4.		
5. SPARE(optional)		
COACH		

Return to:

CSSE

c/o Elaine Wolfson

Unit 423, 230-1210 Summit Drive

Kamloops, B.C. V2C 6M1

Phone/fax: 374-0058

ENTRY FEE: \$ 225.00

To accompany this form

Entry fee covers 4 banquet tickets

Additional tickets can purchased for \$30 each

ENTRIES FIRST COME/FIRST IN

Extra tickets _____ (please indicate number)