



The CORE Society
PO Box 192 Stn. M
Calgary AB
T2P 2H6

Calgary Outdoor Recreation Enthusiasts Society
Course/Training Application

Please read CORE Course Guidelines as published on the CORE website before filling out and submitting this form.

Name: _____

Street Address: _____

City: _____ Province: _____ Postal Code: _____

Phone: () _____ Email: _____ @ _____

Emergency Contact: _____ Contact Phone () _____

Course Name: _____

Course Provider: _____

Course Dates: _____

Course Cost (total): _____

e-mail to: CORE Chairperson (please refer to Executive contacts link for e-mail address), or optionally mail to the address above.

For Executive Committee Use Only:

Approved: _____ Disapproved: _____

Comment: _____

Signing Officer Signature: _____

Date: _____

Reimbursement Amount: _____