

# WEST TEXAS SAFETY TRAINING CENTER

## Medical Services Registration Form

P.O. BOX 60828/MIDLAND TX 79711-11900 W. I-20 E. /ODESSA TX 79765  
(432) 563-3067 "A NON PROFIT CORPORATION" FAX (432) 563-3904

- 1) Social Security and Photo I.D. (i.e. Drivers License) will be required before training/services!
- 2) Students must arrive for class 15 minutes prior to class.
- 3) **REGISTRATION IS REQUIRED at least 24 HOURS IN ADVANCE BY FAX/PHONE**
- 4) **On Line Registration – Member Companies can do 24/7**

**COMPANY NAME:** \_\_\_\_\_

**BILLING ADDRESS:** \_\_\_\_\_

**CONTACT:** \_\_\_\_\_ **PHONE#:** \_\_\_\_\_ **FAX#:** \_\_\_\_\_

01 DOT Drug Collection

02 Non DOT Drug Collection

03 DOT Breath Alcohol Test (\*\*)

04 Pulmonary Function Test

05 Respiratory Protection Training

06 Respiratory Fit Testing (\*)

Make: \_\_\_\_\_ Model: \_\_\_\_\_

### Helpful Tips:

(\*) Any student taking the above marked classes/medical services MUST comply with OSHA's facial hair guidelines as established 29 CFR 1910.134.

(\*\*) Please be advised that WTSTC can provide onsite post accident drug/alcohol services.

**MEMBERS:** You will be billed for the classes selected unless a cancellation is done in Advance.

**NON MEMBERS:** Payment is due at check in. {Cash, Check, MC, & VISA}

Mail / Fax / Email results to: \_\_\_\_\_

(Please circle One)

Authorized Signature: \_\_\_\_\_

Date: \_\_\_\_\_

