

Blasting Exam Registration

This form will not work if opened within an internet browser. You **must** use Adobe Acrobat Reader. **Download** a free copy, if needed. [Click here](#) for instructions on how to complete, save, and submit this form.

Please note: Exam date is not final until a confirmation is received.

Name		Phone number	Email address	
Date of exam (Please review the exam schedule here) First choice (yyyy-mm-dd)		Location of exam		
Second choice (yyyy-mm-dd)		<input type="checkbox"/> Richmond	<input type="checkbox"/> Nanaimo	<input type="checkbox"/> Kelowna
		<input type="checkbox"/> Nelson	<input type="checkbox"/> Cranbrook	<input type="checkbox"/> Prince George
		<input type="checkbox"/> Other	<input type="checkbox"/> Kamloops	<input type="checkbox"/> Terrace
Type of application				
<input type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Rewrite <input type="checkbox"/> Upgrade				
Enter a certificate number, if applicable				
Type				
<input type="checkbox"/> Surface Blaster, First Class		<input type="checkbox"/> Surface Blaster, Second Class		<input type="checkbox"/> Surface Blaster, Third Class
<input type="checkbox"/> Avalanche control		<input type="checkbox"/> Other		
Endorsements				
<input type="checkbox"/> Danger tree		<input type="checkbox"/> Safety fuse		<input type="checkbox"/> Shock tube
<input type="checkbox"/> Electric (single series)		<input type="checkbox"/> Electric (multiple series)		<input type="checkbox"/> Avalauncher
<input type="checkbox"/> Cornice		<input type="checkbox"/> Helicopter deployment		<input type="checkbox"/> Hand charging

Instructions

1. Open the form in Acrobat by going to your Downloads folder and right-clicking on the PDF file. Select Open with > Adobe Acrobat Reader.
2. Type your information in the form.
3. Save your form, then click the Submit button at the end of the form.
4. An email to blastercertification@worksafebc.com will pop up. Ensure your completed form is attached, then click Send.

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