## FORM A: BID (See B8)

1.	Contract Title	PROVISION OF FIRST	AID TRAINING	
2.	Bidder			
		Name of Bidder  Usual Business Name of Bidder as it appears on Invoice (if different from above)		
		Street		······································
		City	Province	Postal Code
	(Mailing address if different)	Email Address of Bidder		
		Facsimile Number		
		Street or P.O. Box		
		City	Province	Postal Code
		GST Registration Number (if applicable)		
	(Choose one)	The Bidder is:		
		a sole proprietor		
		a partnership		
		a corporation		
		carrying on business un	der the above name.	
3.	Contact Person	The Bidder hereby authorizes the following contact person to represent the Bidder for purposes of the Bid.		
		Contact Person	Title	
		Telephone Number	Facsimile Number	
4.	Definitions	All capitalized terms used in the Contract shall have the meanings ascribed to them in the General Conditions.		

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5.	Offer	The Bidder hereby offers to perform the Work in accordance with the Contract for the price(s), in Canadian funds, set out on Form B: Prices, appended hereto.				
6.	Commencement of the Work	The Bidder agrees that no Work shall commence until he/she is in receipt of a notice of award authorizing the commencement of the Work.				
7.	Contract	The Bidder agrees that the Bid Opportunity in its entirety shall be deemed to be incorporated in and to form a part of this offer notwithstanding that not all parts thereof are necessarily attached to or accompany this Bid.				
8.	Addenda	The Bidder certifies that the following addenda have been received and agrees that they shall be deemed to form a part of the Contract:				
		No Dated				
9.	Time	This offer shall be open for acceptance, binding and irrevocable for a period of thirty (30) Calendar Days following the Submission Deadline.				
10.	Signatures	The Bidder or the Bidder's authorized official or officials have signed this				
		, 20				
		Signature of Bidder or Bidder's Authorized Official or Officials				
		(Print here name and official capacity of individual whose signature appears above)				
		(Print here name and official capacity of individual whose signature appears above)				

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FORM B: PRICES (See B9)								
PROVISION OF FIRST AID TRAINING								
UNIT PRICES								
ITEM NO.	DESCRIPTION	UNIT	APPROX. QUANTITY	UNIT PRICE				
1.	All inclusive first aid training fee for First Aider (1)	ea	250					
2.	All inclusive first aid training fee for First Aider (2)	ea	40					
			·					
			Name of Bid	der				