Contract Title

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1.

FORM A: BID (See B8)

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		
		Email Address of Bidder				
		Facsimile Number				
	(Mailing address if different)	Street or P.O. Box				
		City	Province	Postal Code		
		GST Registration Number (if applicable)				
		The Bidder is:				
	(Choose one)	a sole proprietor				
		a partnership				
		a corporation				
		carrying on business under 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				
		day of , 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)	each	250				
2.	All inclusive first aid training fee for First Aider (2)	each	40				
	Name of Bidder						