

# COURSE REGISTRATION FORM



**Please Note: Payment is required at the time of registration - a receipt will be issued as confirmation of course registration.**

**Name:** \_\_\_\_\_

**Company:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Town/City:** \_\_\_\_\_ **Province:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**Phone:** (\_\_\_\_) \_\_\_\_ - \_\_\_\_ **Fax:** (\_\_\_\_) \_\_\_\_ - \_\_\_\_

**Email:** \_\_\_\_\_

**Course:** \_\_\_\_\_

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

**Location:** \_\_\_\_\_

**P.O. #:** \_\_\_\_\_

**Payment Enclosed:** [\_\_]

**Please Invoice:** [\_\_]

**VISA/MASTERCARD:** [\_\_]

**Name on the card:** \_\_\_\_\_

**VISA/MASTERCARD #:** \_\_\_\_\_

**Expiry Date:** \_\_\_\_ / \_\_\_\_

Please Print, fill out and FAX back to 403-223-5810 to register