

Dealing with Violence in the Workplace

Registration Form

Ref # 101

4 Ways to Register:

Fax



Print this form, fill it out and fax it back to 403-253-4926

Online



www.ctrcanada.com or scan this form and email to registration@ctrcanada.com

Phone



Reserve your place by phone: 1-866-471-8555

Mail



Print this form, fill it out and mail it with payment to:

Canadian Training Resources
Suite 205
259 Midpark Way SE
Calgary, AB T2X 1M2

Upon reception of this form one of our representatives will contact you

Please complete all the relevant sections

(Print a separate copy of this form for each workshop attendee)

Attendee Information

Mr. Mrs. Ms.

First Name: _____

Last Name: _____

Email: _____

Company Information

Company Name: _____

Address: _____

City/Town: _____ Prov: _____ Postal Code: _____

Telephone: _____ Ext: _____ Fax: _____

Workshop Information

Location: _____

Date: _____

Fee Calculation and Payment

Fees for this workshop.....\$399.00

- as a previous attendee I am eligible for a 10% discount....\$ _____ (-)*
- If I register 3 or more persons I get \$20 off\$ _____ (-)*
- GST (5%).....\$ _____ (+)
- Subtotal**.....\$ _____ (=)
- HST (where applicable).....\$ _____ (+)

Total.....\$ _____

**If applicable*

By Cheque, payable to **Canadian Training Resources, Ltd**

By Credit Card (check appropriate) Visa MasterCard

Card Number: _____ Expiry: _____

Cardholder's Name: _____

Cardholder's Signature: _____