

4 Ways to Register:



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

Professional Minute-Taking

Registration Form

Ref # 101

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: Prov: City/Town: 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: