

### 4 Ways to Register:

#### Fax



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

#### Online



[www.ctrcanada.com](http://www.ctrcanada.com) or scan  
this form and email to  
[registration@ctrcanada.com](mailto: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: \_\_\_\_\_