

PROFESSIONAL DEVELOPMENT SKILLS WEEK - Spring 2022 Group Registration Form

Important Registration Criteria

Each participant must register for at least two courses during the Professional Development Skills Week to receive the 10% discount.

COURSE INFORMATION

Course Name 1. Minute Taking & Meeting Planning - March 28, 29
 2. Financial Accounting Basics - March 31, April, 1, 2 3. Business Communications - April 6, 7, 8

COMPANY INFORMATION

Company or Provincial Ministry Name		Branch	Key Contact (First and Last Name)
Key Contact's Telephone	Key Contact's Fax		Key Contact's Email
Company's Address 1		Company's Address 2	
City/Town	Province	Postal Code	

STUDENT(S) INFORMATION

Student 1

LEGAL First Name	Date of Birth (MM/DD/YY)
LEGAL Last Name	Gender <input type="radio"/> Female <input type="radio"/> Male

Student 2

LEGAL First Name	Date of Birth (MM/DD/YY)
LEGAL Last Name	Gender <input type="radio"/> Female <input type="radio"/> Male

Student 3

LEGAL First Name	Date of Birth (MM/DD/YY)
LEGAL Last Name	Gender <input type="radio"/> Female <input type="radio"/> Male

Student 4

LEGAL First Name	Date of Birth (MM/DD/YY)
LEGAL Last Name	Gender <input type="radio"/> Female <input type="radio"/> Male

Student 5

LEGAL First Name	Date of Birth (MM/DD/YY)
LEGAL Last Name	Gender <input type="radio"/> Female <input type="radio"/> Male

Student 6

LEGAL First Name	Date of Birth (MM/DD/YY)
LEGAL Last Name	Gender <input type="radio"/> Female <input type="radio"/> Male

Note: Full payment is due upon registration for all courses. Certificates will NOT be issued if payment isn't received in full.

PAYMENT

Course Fee(s) \$ _____ X ____ (# of Students) = \$ _____	Payment Method <input type="radio"/> Cash/Debit <input type="radio"/> Cheque <input type="radio"/> Credit Card (see below)
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Credit Card Number	Expiry Date (MM/YY)	3 Digit CVD Code
Name on Credit Card	Signature	