



Registration for Another or Group

Please complete and email via the [Create Email Attachment](#) button.

Course/Seminar/Conference:

| Registrant #1 | | Registrant #2 | |
|---------------|--|---------------|--|
| Name | | Name | |
| Email | | Email | |
| Registrant #3 | | Registrant #4 | |
| Name | | Name | |
| Email | | Email | |
| Registrant #5 | | Registrant #6 | |
| Name | | Name | |
| Email | | Email | |

| | |
|------------------------------|--|
| # of Registrants | |
| x Price | |
| = Subtotal | |
| + HST (Reg# 844532531RT0001) | |
| = Total payable | |

| | | |
|--|----------------|--|
| Payment Preference: PayPal Invoice Credit Card Payment* Bank e-Transfer | Contact Name | |
| | Contact Email | |
| | Contact Phone* | |
| | Company Name | |
| | & Address | |

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