

New World Leadership: Creating An Accountability Culture

February 11 – October 7, 2019



British Columbia
& Yukon

REGISTRATION FORM – 4 or more Group Discount

15% discount offered per four registrations when registered at the same time.

Registrant # 1 <input type="checkbox"/> Member \$2812.50 <input type="checkbox"/> Non-Member 3125.00 Name: _____ Title: _____ Organization: _____ Mailing Address: _____ City: _____ Prov: _____ Postal Code: _____ Telephone: _____ E-mail*: _____ <small>*E-mail address required. Confirmation/receipt will be sent via email.</small> Special Dietary Needs: _____	Registrant # 2 <input type="checkbox"/> Member \$2812.50 <input type="checkbox"/> Non-Member 3125.00 Name: _____ Title: _____ Organization: _____ Mailing Address: _____ City: _____ Prov: _____ Postal Code: _____ Telephone: _____ E-mail*: _____ <small>*E-mail address required. Confirmation/receipt will be sent via email.</small> Special Dietary Needs: _____
Registrant # 3 <input type="checkbox"/> Member \$2812.50 <input type="checkbox"/> Non-Member 3125.00 Name: _____ Title: _____ Organization: _____ Mailing Address: _____ City: _____ Prov: _____ Postal Code: _____ Telephone: _____ E-mail*: _____ <small>*E-mail address required. Confirmation/receipt will be sent via email.</small> Special Dietary Needs: _____	Registrant # 4 <input type="checkbox"/> Member \$2812.50 <input type="checkbox"/> Non-Member 3125.00 Name: _____ Title: _____ Organization: _____ Mailing Address: _____ City: _____ Prov: _____ Postal Code: _____ Telephone: _____ E-mail*: _____ <small>*E-mail address required. Confirmation/receipt will be sent via email.</small> Special Dietary Needs: _____

Fee Calculations GST (reg # 1199446714)

Total Registration Fees \$ _____ - Less 15% (group discount) \$ _____ + Tax (GST 5%) \$ _____
= **Total Charges \$** _____

Payment Information: Visa AMEX MasterCard Cheque # _____ Enclosed

I agree to have the above Total Charges applied to my credit card. In the event that my credit card is declined for any reason, I understand that I will be charged an additional processing fee of \$30.00.

Card #: _____ Expiry Date: _____

Name as it appears on card: _____ Signature: _____

If your company is paying for this session by credit card and it is GST exempt, you must attach a GST exempt status form, which can be downloaded from our website or requested from our offices.

Registrations are **NOT** accepted on the day of an event. Prepayment is required in order to reserve a seat. Registration forms without payment will not be processed. A \$30 administration fee will be applied to NSF Cheques and declined credit cards. **Cancellation Policy** available online.

Three Easy Ways To Register

Form and payment must be received by CPHR BC & Yukon Office by February 4, 2019.

Mail CPHR BC & Yukon Professional Development 1101 – 1111 West Hastings St. Vancouver, BC V6E 2J3 <i>(send this registration form with payment)</i>	Fax CPHR BC & Yukon Professional Development 1-604-684-3225 <i>(if you fax this form, please do not mail the original)</i>	E-mail pd@cphrbc.ca <i>(online registration not available for discounts)</i>
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