

GROUP REGISTRATION FORM (Multiple Credit Cards)

GROUP INFORMATION

Organization: _____

Group Leader: _____ Email: _____

Phone Number: _____

EVENT INFORMATION

Workshop: _____

Date: _____ City: _____ Province: _____

GROUP MEMBERS (please include only those who will be attending the workshop)

1. Full Name: _____ Email: _____

Credit Card: _____ Expiry: _____

Signature: _____

2. Full Name: _____ Email: _____

Credit Card: _____ Expiry: _____

Signature: _____

3. Full Name: _____ Email: _____

Credit Card: _____ Expiry: _____

Signature: _____

4. Full Name: _____ Email: _____

Credit Card: _____ Expiry: _____

Signature: _____

5. Full Name: _____ Email: _____

Credit Card: _____ Expiry: _____

Signature: _____

6. Full Name: _____ Email: _____

Credit Card: _____ Expiry: _____

Signature: _____

**Each member will be charged an additional \$10 manual registration*

**We accept Visa and MasterCard*

To calculate the total per person, please use the following equation: **(Group Rate + \$10) + tax = TOTAL**

For more information, please contact: registration@jackhirose.com

GROUP REGISTRATION FORM (Multiple Credit Cards)

7. Full Name: _____ Email: _____
Cred it Card: _____ Expiry: _____
Signature: _____

8. Full Name: _____ Email: _____
Cred it Card: _____ Expiry: _____
Signature: _____

9. Full Name: _____ Email: _____
Cred it Card: _____ Expiry: _____
Signature: _____

10. Full Name: _____ Email: _____
Cred it Card: _____ Expiry: _____
Signature: _____

11. Full Name: _____ Email: _____
Cred it Card: _____ Expiry: _____
Signature: _____

12. Full Name: _____ Email: _____
Cred it Card: _____ Expiry: _____
Signature: _____

13. Full Name: _____ Email: _____
Cred it Card: _____ Expiry: _____
Signature: _____

14. Full Name: _____ Email: _____
Cred it Card: _____ Expiry: _____
Signature: _____

15. Full Name: _____ Email: _____
Cred it Card: _____ Expiry: _____
Signature: _____

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For more information, please contact: registration@jackhirose.com



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