

GROUP REGISTRATION FORM (Cheques)

GROUP INFORMATION

Organization: _____

Group Leader: _____ Email: _____

Phone Number: _____ Address: _____

EVENT INFORMATION

Event and Speaker Name: _____

Date: _____ City: _____ Province: _____

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

1. Full Name: _____ Email: _____

Address: _____ City: _____ Province: _____

Postal Code: _____ Phone #: _____

2. Full Name: _____ Email: _____

Address: _____ City: _____ Province: _____

Postal Code: _____ Phone #: _____

3. Full Name: _____ Email: _____

Address: _____ City: _____ Province: _____

Postal Code: _____ Phone #: _____

Cheque # _____ (Please attach to registration form)

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

**Group registrations are not eligible for a refund or credit. Replacements are subject to a \$25.00 fee.*

To calculate the total, please use the following equation:

[(Group Rate + \$10) + tax] x Number of Registrants = TOTAL

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

4. Full Name: _____ Email: _____
Address: _____ City: _____ Province: _____
Postal Code: _____ Phone #: _____
5. Full Name: _____ Email: _____
Address: _____ City: _____ Province: _____
Postal Code: _____ Phone #: _____
6. Full Name: _____ Email: _____
Address: _____ City: _____ Province: _____
Postal Code: _____ Phone #: _____
7. Full Name: _____ Email: _____
Address: _____ City: _____ Province: _____
Postal Code: _____ Phone #: _____
8. Full Name: _____ Email: _____
Address: _____ City: _____ Province: _____
Postal Code: _____ Phone #: _____
9. Full Name: _____ Email: _____
Address: _____ City: _____ Province: _____
Postal Code: _____ Phone #: _____
10. Full Name: _____ Email: _____
Address: _____ City: _____ Province: _____
Postal Code: _____ Phone #: _____

Cheque # _____ (Please attach to registration form)

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11. Full Name: _____ Email: _____

Address: _____ City: _____ Province: _____

Postal Code: _____ Phone #: _____

12. Full Name: _____ Email: _____

Address: _____ City: _____ Province: _____

Postal Code: _____ Phone #: _____

13. Full Name: _____ Email: _____

Address: _____ City: _____ Province: _____

Postal Code: _____ Phone #: _____

14. Full Name: _____ Email: _____

Address: _____ City: _____ Province: _____

Postal Code: _____ Phone #: _____

15. Full Name: _____ Email: _____

Address: _____ City: _____ Province: _____

Postal Code: _____ Phone #: _____

16. Full Name: _____ Email: _____

Address: _____ City: _____ Province: _____

Postal Code: _____ Phone #: _____

17. Full Name: _____ Email: _____

Address: _____ City: _____ Province: _____

Postal Code: _____ Phone #: _____

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