

Registration Form



STEP 1: CERTIFICATE PROGRAM REGISTRATION

If you are registering for a certificate program, please list the certificate title and proceed to Step 2 to list the required and elective seminars.

Certificate _____

STEP 2: SEMINAR PROGRAM REGISTRATION

Please list your seminar(s) and dates. Print clearly.

| | |
|---------|-------------|
| 1 _____ | Dates _____ |
| 2 _____ | Dates _____ |
| 3 _____ | Dates _____ |
| 4 _____ | Dates _____ |
| 5 _____ | Dates _____ |
| 6 _____ | Dates _____ |

STEP 3: PARTICIPANT REGISTRATION INFORMATION

Please complete this section in full. Your name will appear on your certificate as printed. Print clearly.

Mr. Mrs. Ms.

First Name _____ Last Name _____

Company/Organization _____

Department _____ Job Title _____

Work Address OR Home Address _____

E-mail _____ Fax _____

City _____ Province _____ Postal Code _____

Tel Preferred _____ Work _____ Cell _____

Would you like to receive notification of upcoming programs and events? Email Mail

STEP 4: 10% GROUP DISCOUNT*

Are you taking advantage of our group discount? YES NO

* For 3 or more from the same company registering for the same program offering. Each registrant must complete a form. All forms must be submitted together and provide names of accompanying registrations:

STEP 5: PAYMENT METHOD

Payment is due in advance of the program start date. Please indicate your payment method: Print clearly.

Credit Card:

Invoice my organization

Attention _____

E-mail _____

Tel _____

City _____

Province _____

Postal Code _____

PO# _____

Special Note: _____

Invoice/Receipt Address (if different from STEP 3)

Visit epd.smu.ca for full Payment, Cancellation, Transfer and Substitution Policies