



CONFERENCE REGISTRATION

DELEGATE INFORMATION

Delegate Name: _____ Designations: _____

Company: _____

Phone: _____ Email: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Dietary Restriction: _____

ADDITIONAL REGISTRATIONS

<p>■ Delegate Name: _____</p> <p>Designations (RCM, ACCI, FCCI): _____</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Dietary Restriction: _____</p>	<p>■ Delegate Name: _____</p> <p>Designations (RCM, ACCI, FCCI): _____</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Dietary Restriction: _____</p>
<p>■ Delegate Name: _____</p> <p>Designations (RCM, ACCI, FCCI): _____</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Dietary Restriction: _____</p>	<p>■ Delegate Name: _____</p> <p>Designations (RCM, ACCI, FCCI): _____</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Dietary Restriction: _____</p>

REGISTRATION FEES per person

FRIDAY, MARCH 6th

Registration includes: educational sessions, access to trade show, lunch, refreshment breaks, & program material

<u>Members</u>	\$49.99 ea.	x	_____	=	\$ _____
<u>Non Members</u>	\$250.00 ea.	x	_____	=	\$ _____
<u>Students</u>	\$30.00 ea.	x	_____	=	\$ _____
	SUBTOTAL			=	\$ _____
	+ 13% HST			=	_____
	TOTAL			=	\$ _____

PAYMENT OPTIONS

Cheque (enclosed)

Make cheque payable to CCI Golden Horseshoe Chapter

Send to:

Golden Horseshoe Chapter of the Canadian Condominium Institute

Box 37, Burlington, ON L7R 3X8

TEL: 905-631-0124 / 1-844-631-0124 / FAX: 416-491-1670

EMAIL: admin@cci-ghc.ca

Credit Card registration available online only at:

<https://cci-ghc.ca/conference/register>