Completing Life's Journey

WORKSHOP REGISTRATION FORM

Please fill out completely so that your registration may be processed promptly.

Name _____
(last) (first)

Address _____
(Number, street, city, PC)

E-mail Address _____

Organization: _____ Phone _____
(if applicable)

Please register me for the following:

Workshop Date	Workshop Title	Name of Participants	Amount Enclosed
Sept 20	Care for the Soul	You can register up to three participants per page 1) 2) 3)	$
Sept 21	Getting It Right	1) 2) 3)	$
NOTE: (i.e. special dietary requirements)			

Sessions will be $15/day in advance or $20 at the door

Refunds 7 days before event. If the workshop is cancelled by the organizer, your deposit and any balance paid will be refunded.

All cheques should be made payable to: HNCSSS.

Mail registration form and cheque to: 73 Parkview Road, Hagersville, ON, N0A 1H0
C/O Completing Life's Journey