



the support network

400, 10025 – 106 Street (Baker Centre) Edmonton AB T5J 1G4

Phone: (780) 482-0198 Fax: (780) 488-1495

MANUAL EVENTBRITE REGISTRATION FORM

NAME: _____ CONTACT PHONE #: _____

AGENCY: _____ DATE: _____

ADDRESS: Agency Res. _____

EMAIL ADDRESS: _____ NO EMAIL ADDRESS AVAILABLE

<input checked="" type="checkbox"/>	WORKSHOP	WORKSHOP DATE(S)	FEE
	2-Day Suicide Intervention Certification Training (14 hrs)		\$135 (\$6.75 GST) = \$141.75
	1-Day Suicide Intervention Training (7 hrs)		\$70 (\$3.50 GST) = \$73.50
	De-Escalating Angry Clients (3 hrs)		\$45 (\$2.25 GST) = \$47.25
	Debriefing Stressful Situations (3 hrs)		\$45 (\$2.25 GST) = \$47.25
	Understanding Self Harm (2hrs)		\$40 (\$2.00 GST) = \$42.00
	Community Connections (2.5 hrs)		\$40 (\$2.00 GST) = \$42.00
TOTAL AMOUNT DUE:			\$

METHOD OF PAYMENT:

MCARD / VISA _____ Exp: _____ / _____

Cardholder Name: _____ Authorization #: _____

Cheque #: _____ Cash: _____

<i>OFFICE USE ONLY</i>	RECEIPT & CONFIRMATION SENT: <input type="checkbox"/> EMAIL <input type="checkbox"/> MAIL <input type="checkbox"/> FAX # <input type="checkbox"/> IN PERSON		
	<input type="checkbox"/> RECEIPT TO BE PICKED UP AT WORKSHOP		
EVENTBRITE CONFIRM. #:	REFUND DATE:	<input type="checkbox"/> MCRD <input type="checkbox"/> VISA <input type="checkbox"/> PAYPAL <input type="checkbox"/> CHQ	AUTH. #
NOTES:			