

Registration Form

ALBERTA CARE Spring Seminar 2019

February 27- March 1st, 2019 Heritage Inn Hotel and Conference Centre
403-652-3834 - Block of Rooms under "Alberta CARE"

Names: _____

Organization: _____

Address: _____

Email Address: _____ Phone: _____

Fax: _____

NO CHARGE FOR WORKSHOP ON TUESDAY, FEB 26TH (at Heritage Inn)

Please indicate the number attending the workshop for Pre-Disaster Debris Management _____

NO CHARGE FOR Spring Seminar TOURS: (pick up at front doors of Heritage)

Please indicate the number attending Wednesday Tour _____

Please indicate the number attending Thursday Tour _____

Sub Total \$ _____

Conference Fee: \$425.00 p.p \$ _____

LESS 10% (if 3 or more attend) \$ _____

GST \$ _____

Spouses or Guests attending meals:

Breakfast Buffet @ \$25.00 p.p. \$ _____

Luncheon @ 30.00 p.p. \$ _____

Buffet @ 60.00 p.p. \$ _____

TOTAL \$ _____

FAX TO: 780-980-0232

MAIL PAYMENT TO: Alberta CARE, 5212 49 Street, Leduc, Alberta T9E 7H5

EMAIL: executivedirector@albertacare.org

Please indicate any food allergies: _____