



SN Unit 1-6 Workshop
September 9th and 10th, 2016

WORKSHOP FEE: \$175.00
(Please print clearly)

NAME: _____

ADDRESS: _____

CITY: _____

PROVINCE: _____

POSTAL CODE: _____

EMAIL: _____ **TEXT:** _____

Make cheque or money order payable to Alberta Cultural Society of the Deaf
and mail with the registration form to:

Alberta Cultural Society of the Deaf
#206, 11404 - 142 St NW
Edmonton, AB T5M 1V1

We accept Visa, MasterCard, Debit, Cash and Cheque
There is a \$2 surcharge for Visa/MasterCard and \$0.10 surcharge for Debit.

PAYMENT METHOD: _____

NAME ON CREDIT CARD: _____

CREDIT CARD NUMBER: _____

EXPIRY DATE: _____ **SECURITY CODE:** _____

SIGNATURE OF AUTHORIZATION: _____