

Registration Form

ATTENDEE

COMPANY

Name _____

Name _____

Position / Title _____

Address _____

Telephone _____

Email _____

Point of contact authorizing this registration (if other than attendee):

Name _____

Position / Title _____

Telephone _____

Purchase Order _____

Email: _____

Charge Card / Exp. Date _____

3 DIGIT CVV _____

Please note: Email address required.

Course updates for this training seminar will be emailed.

Seminar Fee: \$585.00 per attendee

Cancellation Fee: \$50.00 (if made within 48 hours of seminar)

Location: Indicate your choice of location here:
Winnipeg Saskatoon Regina
Other: _____

Date & Time: Still To be Determined - based on interest
8:00am - 4:30pm
(lunch will be provided)

PLEASE **EMAIL** THIS COMPLETED REGISTRATION TO:

Attn.: Training Services Department
info@winnipeg.swagelok.com

Subject to registration - date may change

