Registration Form

Thank you for your interest in Empowerment Plus® Training. Below, please indicate your choice of workshop, the location, the date(s) and the time of the training. We will confirm your registration and address for the workshop when payment is received. Your email address will not be shared.

_____ _____

Name of Training Workshop | Location

_____ _____

Date(s) | Time

Instructions for Faxed or Mailed Registrations

Fax this sheet with credit card info to 1-403-547-4288 or mail this sheet and your payment to Dr. Teeya Scholten, c/o Empowerment Plus® International Inc., P.O. Box 923, 105-150 Crowfoot Cres. NW, Calgary, AB. T3G 3T2. Payment methods accepted are VISA, MasterCard or Certified Cheque.

Name_____ Payment enclosed _____

Address_____

City_____Postal Code_____

Email_____Website _____

Phone (W)_____(H)_____ Fax _____

Dietary Restrictions_____

Name on Certificate of Attendance (if other than above) _____

If paying by credit card, write VISA or Master Card # and Expiry date in space below

Card Number:_____ Expiry Date:_____

Signed:_____Dated:_____

Cancellation and Refund Policy

A full refund less a $50 processing fee will be given for cancellations received fourteen (14) days prior to the Continuing Education activity. Late cancellations will be considered in cases of illness or emergency; however, the $50 processing fee will apply. Empowerment Plus® International Inc. reserves the right to cancel any activity, in which case a full refund of the registration fee will be provided.