



# ABC 2018

## Registration Form

June 17-19, 2018



**Is this your first Annual Business Conference?**

Yes                       No

DELEGATE INFORMATION Please complete information or attach business card	COMPANION INFORMATION Please complete information
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Name:	Name:
Title:	E-mail:
Company:	
Address:	<b>CHILD/YOUTH INFORMATION</b>
City:	Name:
Prov.:	Age:
Postal code:	Name:
Tel.:	Age:
Fax:	Name:
E-mail:	Age:

PAYMENT INFORMATION:		Early Bird Price	After February 15 <sup>th</sup>
Includes all business sessions and speakers  <b>PLUS 5 MEALS</b>	<input type="checkbox"/> Delegate & Companion	Delegate: \$1,040.00 Companion: \$600.00 <u>+5% GST \$82.00</u> <b>TOTAL \$1,722.00</b>	Delegate: \$1,092.00 Companion: \$630.00 <u>+5% GST \$86.10</u> <b>TOTAL \$1,808.10</b>
	<input type="checkbox"/> Delegate only	\$1,040.00 <u>+5% GST \$52.00.00</u> <b>TOTAL \$1,092.00</b>	\$1,092.00 <u>+5% GST \$54.60</u> <b>TOTAL \$1,146.60</b>

**OPTIONAL ACTIVITIES ARE EXTRA**

**PAYMENT METHOD**                      ***THIS IS YOUR INVOICE***

CHEQUE     MASTERCARD     VISA                      (GST/HST#10686 1669RT0001)

**Total \$**

Card Number: \_\_\_\_\_                      Expiry Date:    /                      CVV#: \_\_\_\_\_

Card Holder Name: \_\_\_\_\_                      Signature: \_\_\_\_\_

**REGISTRATION PROCESS**

Please complete & forward along with **ACTIVITY CHECKLIST (S)** to:

**Canadian Institute of Plumbing & Heating**  
**295 The West Mall, Suite 504, Toronto, ON M9C 4Z4**  
 Tel: 1-800-639-2474    Fax: 416-695-0450  
 Geeta Persaud | Registrar: [g.persaud@ciph.com](mailto:g.persaud@ciph.com)