



New Warrior Training Adventure GBTQ Ontario Registration Form



MKP of Canada Inc. Charitable Registration #869188110RR0001

Event Date & Location:	Friday Late Afternoon, March 31st to Sunday Late Afternoon, April 2nd, 2017 <i>(Specific times will be confirmed at a later date)</i> Pearce Williams Retreat Center 8009 Iona Road, Fingal, ON N0L 1K0 <i>(Detroit is the closest airport)</i>	Today's Date _____
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REGISTRANT INFORMATION

Name:	Date of Birth: MM/DD/YYYY
Address:	City, Province, Postal / ZIP
Preferred Phone: <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Other	Alternate Phone: <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Other
Email Address: <input type="checkbox"/> Check to confirm you check email regularly and can receive attachment documents.	How do you identify? Straight, Bi, Gay, Trans, Queer?

PAYMENT INFORMATION

Event Fees: \$650.00 CDN – **Early Registration** if confirmed by January 20th, 2017

\$750.00 CDN – Regular Tuition

The above fee is non-taxable and includes all training, materials, lodging and meals.
A non-refundable deposit of \$150 confirms your registration. The balance is payable 2 weeks prior to the event.*
You will receive a charitable receipt for a portion of the fee paid.
** Flexible payments, payment plans and limited scholarships may be available; contact the Event Registrar.*

Payment : <input type="checkbox"/> Cheque Mailed (Pay: ManKind Project of Canada Inc.) <input type="checkbox"/> Credit Card (provide details below) <input type="checkbox"/> PayPal http://mkpcommunity.ca/page/ontario-paypal (email your PayPal receipt to the Event Registrar)	Event Registrar: Richard Stewart 201-294 Talbot Street St.Thomas ON N5P 4E3 rickstewart@bell.net Cell: 226.378.7177 Fax: 226.212.0133
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Name on Card: _____ Credit Card #: _____ Expiry Date: ____ ____ CSC#: _____ <i>Back of Card</i> <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> Charge Full Amount Now. <input type="checkbox"/> Charge \$ _____ deposit now and balance 2 weeks prior. Minimum \$150.00 Deposit required	<p>By signing below or, if completing online, entering your full name in the box below, you authorize ManKind Project of Canada Inc. to proceed with your registration for this event and / or to charge your credit card as instructed.</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div> <p style="text-align: center;">Signature</p>
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Send your completed registration form & payments to the Event Registrar listed above.