

ARCQE REGISTRATION FORM

Participant Name _____

Organization Name _____

Address _____

City _____ Postal Code _____

E-mail Address _____

Phone _____

Organization/Program _____ Position - Specify _____

WORKSHOP SELECTION

Please note: When selecting your workshops please numerically order them with #1 being your first choice. We will do our best to help you get your first choice but registration is done on a first come first served basis so PLEASE register early to avoid disappointment. A confirmation receipt will be E-MAILED to you so please ensure that your E-MAIL address is legible, no other receipts will be issued. If you notice any errors please contact our office within 7 days of receipt of e-mail, if we are not notified we will assume everything is correct and those will be the Workshops you will be registered in.

Morning Registration, Continental Breakfast and Vendor Village - 8:00 – 8:45
 Opening Greetings and Keynote Address 8:45-10am and Closing Address is 4 to 4:30pm

Stream 1 - Workshops 10:15 – 10:45am	Please fill in appropriate boxes:		
	Item	Rate	Cost
<input type="checkbox"/> Let's get the Village Talking..."About the Early Years."	EARLY BIRD RATES (Before Oct 31/11)		
<input type="checkbox"/> The Project Approach	Conference Fee (PTL Card)	\$200.00	
<input type="checkbox"/> Raising the Village – The Village Experience	Conference Fee	\$250.00	
<input type="checkbox"/> When incidents occur in the Village or the Vendor's Village (circle one)	REGISTRATION RATE (After Oct 31/11)		
Stream 2 - Workshops 12:45 - 2:15pm			
<input type="checkbox"/> Giving children a voice in play space design	Conference Fee (PTL Card)	\$250.00	
<input type="checkbox"/> Seeds of Empathy	Conference Fee	\$300.00	
<input type="checkbox"/> Children's Rights in Practice			
<input type="checkbox"/> Move and Play through Physical Literacy or the Vendor's Village (circle one)			
Stream 3 - Workshops 2:30 - 4:00pm			
<input type="checkbox"/> Mentoring: Where do we go from here?	Featured Book Package	\$150.00	
<input type="checkbox"/> RIRO information session			
<input type="checkbox"/> Ethics in Action			
<input type="checkbox"/> Program Showcase	Total		\$

Cancellation Refund Policy for this Event
 If you are unable to attend you are allowed to send an alternate in your place at no additional charge. Please inform our office of the new participant's name. All cancellation requests must be received at least 10 business days prior to the start of the Conference. Refunds are subject to a 50% cancellation fee. No refunds will be made for requests received after that time. Refunds will be issued in the same form payment was made. Please allow four weeks for processing. Registrants who cancel will not receive seminar materials

Payment Policy: If you wish to pay by CREDIT CARD, FAX in this registration form with your credit card information to: (780) 421-1730. If you wish to pay by CHEQUE, MAIL in this registration form with your cheque to: ARCQE Suite 110 10025 - 106 Street, Edmonton AB T5J 1G4.

- Yes, I wish to pay by Cheque. Please find my cheque enclosed for \$ _____

- YES, I wish to pay by

Visa/MC Credit Card Number: _____

Exp.Date: _____

Signature: _____

By signing above I authorize ARCQE to charge my Credit Card the amount of \$ _____