

REGISTRATION FORM

Send completed form to: training@QMenv.com

COURSE INFORM	ATION				
COURSE					
COURSE DATE					
COURSE TUITION	+ .		(HST) = \$ _		_ PER ATTENDEE*
PARTICIPANT INF	ORMATION				
ATTENDEE - Please provid	de a completed regis	stration form for e	each participant		
MR / MRS / MS					
COMPANY		POSITION _		· · · · · · · · · · · · · · · · · · ·	
ADDRESS					
CITY		PROVINCE _		POSTAL CODE _	
BUSINESS PHONE*			RESIDENCE	PHONE*	
FAX		EMAIL			
Please provide both busine	ess and residence te	lephone number	s in case of cha	nge.	
PAYMENT OPTION	NS				
PLEASE SELECT ONE	VISA	MASTERCAR	RD	OTHERS	
CARD NUMBER					
EXPIRY DATE					
SIGNATURE					

Full payment is required to secure your spot.

Courses canceled within 7 days of set date will be charged 25% of the tuition fee.

Cancellation with less than 72 hours notice will result in full charges for the course.

QM LP reserves the right to cancel courses.

