

Canadian Association of Elizabeth Fry Societies and the Elizabeth Fry Society of Ottawa Conference  
 Friday June 3rd, 2016  
**REGISTRATION FORM**

**PARTICIPANT INFORMATION**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Are you a student requesting a reduced fee?  <input type="radio"/> Yes <input type="radio"/> No	Are you registering two or more people for the discounted fee?  <input type="radio"/> Yes <input type="radio"/> No	<b>Conference Registration fee:</b> \$200 per person Discount: \$350 if registering two people Student fee: \$50 Women with lived experience: \$0-\$25 CAEFS Member (Conference and AGM): \$100  <b>Lunch included</b>
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Cheque or credit card information enclosed? (please note you are not registered until payment has been received):  <input type="radio"/> Yes <input type="radio"/> No	Receipt required? (Receipt will be sent to the email provided)  <input type="radio"/> Yes <input type="radio"/> No
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Address (including postal code):	Home phone no.:	Email:
Occupation:	Employer:	Work phone no.:

Also registering: List people you are registering for the group discount:  Same address or provide address for co-registrants:

**PAYMENT INFORMATION**

Methods of payment accepted: Visa, MasterCard and Cheque

Please charge \$ _____ to my <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard  My credit card number is _____  Expiry Date (m) _____ / (y) _____  Signature: _____	Dietary restrictions (a boxed lunch is provided):	Mail registration and cheque or credit card information to:  CAEFS/Efry Ottawa 2016 Conference registration C/O The Elizabeth Fry Society of Ottawa 211 Bronson Avenue, Suite 309 Ottawa, Ontario K1R 6H5 Attention: Bryonie Baxter
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Signature: \_\_\_\_\_ Date: \_\_\_\_\_