



## SPEECHREADING 1 & COPING Class Registration Form

[ ] Dr.    [ ] Mr.    [ ] Miss    [ ] Ms.    [ ] Mrs.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone / Fax: \_\_\_\_\_ / \_\_\_\_\_ Voice \_\_\_\_\_ TTY \_\_\_\_\_

E-mail: \_\_\_\_\_

Occupation: \_\_\_\_\_

How did you find out about this course?

\_\_\_\_\_

Registration fee of **\$175.00** maybe paid online - PayPal, by cash (in person only) or mail (cheque or money order). Cheque made payable to **CHHA-Edmonton Branch**. Receipts for mailed in payment will be give out at first class. Confirmation of registration will be done by email.

Please email ([info@chha-ed.com](mailto:info@chha-ed.com)) or mail your registration form to the office or bring in during office hours (Monday & Wednesday 12:30 - 5:00 pm and Thursday)

**CHHA - Edmonton    12122 68 Street    Edmonton, AB    T5B 1R1**

**I hereby consent to:**

CHHA-ED using my name and/or image on the CHHA-ED website, newsletters, and brochures for promotional and information purposes.

CHHA-ED using electronic email as a main means of communicating with me

**Please sign and date if you give consent**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office use only

Cheque [ ]    Cash [ ]    Amount Paid: \$ \_\_\_\_\_    Initial and Stamp Date Received: \_\_\_\_\_