



Registration Fees (All prices are listed in Canadian Dollars. Conference registration is subject to 5% GST.)

Early Bird Registration until September 16, 2016: COHERE Institutional Members - \$225.00 + GST; COHERE Non-members - \$295.00 + GST; COHERE Graduate Students - \$150.00 + GST.

Registration after September 16, 2016: COHERE Institutional Members - \$275.00 + GST; COHERE Non-members - \$385.00 + GST; COHERE Graduate Students - \$175.00 + GST.

Confirmation and Cancellation Policy

The University reserves the right to cancel or reschedule the event offered. In the event of cancellation, the full fee will be refunded. Participation is not confirmed until payment is received. Confirmation receipt will be sent by email upon receipt of payment. If you wish to withdraw your registration, a full refund less a \$100 administration fee will be issued if you give notice by September 30, 2016, after which date refunds are not possible. With advance notice, you are welcome to transfer your registration and send a substitute. We are not able to accommodate split registrations. Kindly email Dennis.Liu@umanitoba.ca with delegates and organization name and your wish to withdraw. If you have any registration questions or have any dietary/accessibility that require special materials or services, please contact Dennis Liu at 204-474-9461; toll free at 1-800-432-1960 ext. 9461 or email: Dennis.Liu@umanitoba.ca

Withdrawal Date:

September 30, 2016.

Travel and Accommodation

You are responsible for making your own travel and accommodation arrangements. They are not part of the conference fee.

Please complete this form and return with payment to: Student and Instructor Services, 185 Extended Education Complex, University of Manitoba, Winnipeg, Manitoba, R3T 2N2. If you choose to pay by credit card, you may register by fax, 204-272-1626 or scan and email to extended@umanitoba.ca.

GROUP REGISTRATION FORM

Organization's Name: _____

Address: _____ City/Town: _____

Province: _____ Postal Code: _____

Phone: _____ Contact Person: _____ Email: _____

NAME OF EACH DELEGATE

Mr. Mrs. Dr. Ms. Miss Name: _____

Email: _____ (Please select from the workshops below)

Will you be attending the Welcome Reception? Yes No Is this your first conference? Yes No Would you like your name published on the delegate list? Yes No

Mr. Mrs. Dr. Ms. Miss Name: _____

Email: _____ (Please select from the workshops below)

Will you be attending the Welcome Reception? Yes No Is this your first conference? Yes No Would you like your name published on the delegate list? Yes No

Mr. Mrs. Dr. Ms. Miss Name: _____

Email: _____ (Please select from the workshops below)

Will you be attending the Welcome Reception? Yes No Is this your first conference? Yes No Would you like your name published on the delegate list? Yes No

Mr. Mrs. Dr. Ms. Miss Name: _____

Email: _____ (Please select from the workshops below)

Will you be attending the Welcome Reception? Yes No Is this your first conference? Yes No Would you like your name published on the delegate list? Yes No

If you have more than 4 participants, complete and submit another form and attach to this one.

Your personal information is being collected under the authority of *The University of Manitoba Act*. The information you provide will be used by the University for the purpose of registration, communication, and processing payment. Your personal information will not be used or disclosed for other purposes, unless permitted by *The Freedom of Information and Protection of Privacy Act (FIPPA)*. If you have any questions about the collection of your personal information, contact the Access & Privacy Office (tel. 204-474-9462), 233 Elizabeth Dafoe Library, University of Manitoba, Winnipeg, MB, R3T 2N2.

PLEASE INDICATE TYPE OF PAYMENT

Cheque/Money Order – Payable to the University of Manitoba (post-dated cheques can not be accepted).

Invoice Employer – A request to invoice must be on letterhead and authorized by an official of the employer or sponsoring agency. Without prior credit history, amounts over \$1,000 require credit approval. Contact Student and Instructor Services at 204-474-8800 or Toll-free 1-888-216-7011 ext. 8800 for a copy of the required form.

Payment by credit card – Complete the following section. Visa MasterCard

Card holder's name (as it appears on the card): _____ Amount: \$ _____

Authorizing signature: _____

Credit card number: _____ Expiry date: _____