Fax to:	**APD Saskatoon**
Fax #	**306-244-7152**

REGISTRATION FORM - SASKATOON

Bob Greenwood & Rui Martins 4 DAY Business Development Course

Shop Name			
Contact Person		**Tel. #**	
Course Date	**February 6th 7th & 13th 14th, 2012**	**Time:**	**8AM to 4PM**
Course Cost	**$1,595.00 per person (plus HST/GST)**		
Payment Options ✓one	☐ **Cheque** ☐ **Visa** ☐ **M\C** ☐ ☐ **Charge to my APD Account**		

Course must be paid in advance to secure your seat

Make Cheque Payable to: **Automotive Parts Distributors and mail to P.O. Box 783, Red Deer Alberta T4N 5H2**
Attention: Bob Greenwood / Rui Martins Course

My signature below authorizes a charge to my credit card in the amount of: $_____

Signature: _____ Name on Card_____

Card # ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ **Expiry** ☐☐ **mm\yy**

Print Clearly

Business Name: _____

Business Address: _____City _____P\C_____

Telephone: Bus: (_____)_____Fax: (____)_____

Bus. Email: _____Home. Email:_____

Student's Name: _____
First Last

Home Address:_____CITY_____P\C_____`

Telephone: Res (_____)_____ ***One Registration form per student***

Signature:_____

This fee is for the course only. Accommodations in Saskatoon are available at The Saskatoon Inn (306-242-1440) and the attendees are responsible for booking and paying for their rooms.

I also understand that by signing this form, we agree that any or all registrations are non-refundable. Registrants may however be substituted within 10 days prior to the start date of the course.