



CAAWS Women In Leadership Workshops

Whistler Athletes Center, 1090 Legacy Way, Cheakamus Crossing

NAME: _____

ADDRESS: _____ Prov. _____ postal code: _____

PHONE: _____ EMAIL: _____

I AM REGISTERING FOR CAAWS workshop(s);

Conflict Management	Nov. 8	6:00pm - 9:00pm	<input type="checkbox"/>	\$15.00
Influcencing Change	March 7	6:00pm – 9:00pm	<input type="checkbox"/>	\$15.00

Info on CAAWS: <http://www.caaws.ca/>

I have enclosed Payment in the amount of \$ _____ Cash Cheque
(cheques payable to Whistler sport Legacies)

Visa # _____ Expiry: ____/____ CVC # _____

Signature: _____

****Payment must be received, in full, prior to the start date****

Please submit your registration form via email if paying with visa, by mail Attn Tami Mitchell or in person at 1080 Legacy way, Whsiter BC, VON 1B1. Once your registration form and payment has been received and accepted you will receive written confirmation by email, containing all applicable information.

Contact:
Tami Mitchell
Manager, Program Development
tmitchell@whistlersportlegacies.com
604-907-0365

Whistler Sport Legacies

Mail: 1080 Legacy Way, Whistler, BC, Canada VON 1B1
Street: 4910 Glacier Lane, Whistler, BC, Canada VON 1B4
Web: www.whistlersportlegacies.com

