

CPO® Registration Form May 2-4 OR Nov 14-16, 2023

Indicate the type of instruction you are registering for and which date:

- Online Virtual
 May 2-4 Nov. 14-16

Name

First Name _____ Last Name _____

Facility

Name _____

Facility Address

Street _____

City _____ Province _____

Postal Code _____

Phone Number and Email of Contact

Phone _____ Email _____

Registration Fee:

- Member: \$619.95 ^{+tax} Non-Member: \$699.95 ^{+tax}

Method of Payment:

- Enclosed Visa/Master Card:
 Online Card Number _____
 Please Invoice me PO #: _____ Expiry _____
Name on Card _____
Signature _____

Send the registration form to 5516 Spring Garden Road, 4th floor, Halifax, NS B3J 1G6

Questions?

Phone: (902) 425-5450 ext. 330 or (902) 870-7643 Email: rfans@sportnovascotia.ca