

2019 Healthy School Communities National Forum Forum national

sur les écoles en santé 2019

Ottawa, ON | November 5-7

Partner Registration Form

COMPANY NAME:			
ADDRESS:			
Street Address	City	Province	Postal Code
WEBSITE:			
CONTACT NAME:			
PHONE NUMBER:			
NUMBER OF REPRESENTATIVES ATTEND			
NAME OF FIRST ATTENDEE:			(please print)
NAME OF SECOND ATTENDEE:			(please print)
Conference Partner Selection			
Presenting Partn	er 🗆	Signature	e Partner
Partner Activation*			
☐ Nutrition Break(s)		Active Morning	Session(s)
Welcoming Ceremonies		Lunch	(-)
Delegate Bags		Active Morning	Session
Conference Lanyards		Exhibitor Marke	
Additional Notes:			
_		4	
	Exhibiting Par		
☐ Profit Organization \$600	☐ Not-for-p	profit Organization	\$ 500
Billing Information			
Invoice Cheque (payable to PHE	Canada)		
Credit Card: MasterCard Visa No		Exp	/ CVV #
Signature:			
*By completing this form, you are agreeing to the Terms		or the 2019 HSC Forum	
			•
Information:			
 PHE Canada holds final approval on all Partner submissions. Payment will not be processed until your registration has been approved. 			
·	•	• •	
- A PHE Canada representative will be in	n contact once	your registration n	as neen approved.