

Unity in the Workplace®



Registration Form

First Name	Last Name		
Organization (if Applicable)	Position/Title		
Street Address	City	Prov.	Postal Code
Phone (work)	Cell #	Email:	

I give Soaring Eagles Seminars permission to e-mail me periodic information on upcoming workshops, events, presentations, newsletters and other promotional messages.

How did you hear about our workshop programs?

- | | |
|--|--|
| <input type="checkbox"/> Website | <input type="checkbox"/> Friends |
| <input type="checkbox"/> Facebook or twitter | <input type="checkbox"/> Manager or Director |
| <input type="checkbox"/> Co-worker | <input type="checkbox"/> Leadership |
| <input type="checkbox"/> Poster | <input type="checkbox"/> Other _____ |

Training Location: _____

Dates: _____

	Workshop(s)	Location	Dates	Rates
	Unity in the Workplace Returning Participants Early Bird - Two weeks prior			\$ 795.00
	Unity in the Workplace Regular registration			\$ 895.00
	Unity in the Workplace Group Rate - 3 or more people			\$ 695.00
			Total	\$

Cheque Enclosed
 Cheques Payable to: **Soaring Eagles Seminars 104 West Haven Drive, Unit 108 Leduc, Alberta T9E 0N9**
Please email your registration early.

Invoice to: _____

E-Transfer– info@soaringeaglesseminars.com

If you have any questions please do not hesitate to contact us

Fax: 1-204-800-0316 **Phone:** 1-204-307-6153 **Email:** info@soaringeagleseminars.com