

Registration Form

SUNDAY, NOVEMBER 4 – TUESDAY, NOVEMBER 6 • 2018

COMPLETE AND SEND TO:

FAX:

705.326.1097

MAIL:

OSLC Headquarters
498 Moon Point Drive
Oro-Medonte, Ontario
L3V 0R8

SCHOOL / GROUP NAME _____

MAILING ADDRESS _____

CITY _____ PROVINCE _____ POSTAL CODE _____

SCHOOL PHONE _____ EXT. _____ FAX _____

ADVISOR NAME _____ POSITION/TITLE _____

ADVISOR eMAIL ADDRESS (REQUIRED) _____ CELL # (in case of emergency only, will be kept confidential) _____

How many years has your school attended OSLC conferences? _____

REGISTRATION will NOT be processed until both REGISTRATION FORM and FULL PAYMENT are received at OSLC HEADQUARTERS

EARLY BIRD	REGULAR
Fee must be received between NOVEMBER 8, 2017 & APRIL 6, 2018	Fee if received on/after APRIL 7, 2018
<p>ADVISORS:</p> <p># _____ attending @ \$122.00 per person = \$ _____</p> <p>STUDENTS:</p> <p># _____ attending @ \$148.00 per person = \$ _____</p>	<p>ADVISORS:</p> <p># _____ attending @ \$138.00 per person = \$ _____</p> <p>STUDENTS:</p> <p># _____ attending @ \$179.00 per person = \$ _____</p>

Above fees include ALL ACCESS Conference entry for the full three days. Participants are responsible for their own travel, accommodations and all other additional expenses.

How did you hear about us?

- Alumni Direct mailing
 Website From a friend / other school
 YLCC Canadian Youth Speakers Bureau

SUMMARY OF PAYMENT SUBMITTED

Advisor Total \$ _____
 Student Total \$ _____

Sub Total: \$ _____
HST 13%:
 (#85023 2471 RT0001) \$ _____

TOTAL PAYMENT: \$ _____

PAYMENT OPTIONS

- Cheque** (made payable to "YLCC c/o OSLC") *NO POST DATED CHEQUES - \$30.00 administration fee will be charged on all NSF cheques*

 Card # _____
 Expiry Date _____ 3 digit CCV number on back of card _____

Credit Card Holder Name _____

Signature _____

For information,
please contact:

OSLC

Office: 705.326.2433

Email: info@ylcc.com

<http://ylcc.com/student-conferences>