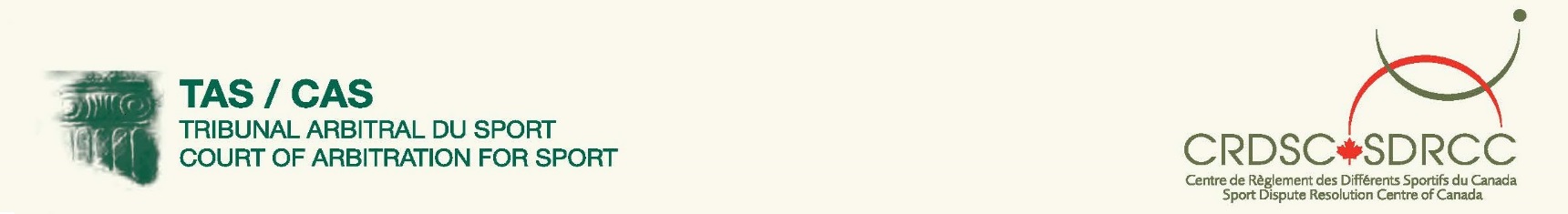
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PERSONAL INFORMATION** | | | | | | | | | | | | | | | | | | |
| Last Name: |  | | | | | | First Name: | | | | | |  | | | | | |
| Name of Organization (if applicable): | | | | | | | | | | | | | | | | | | |
| **Category:** | **Student ($75)**  *Before midnight (EST) on December 1st, 2015 – A proof of full-time registration in a college or university during the winter 2015 session may be requested.* | | | | | | | | | | | **Early Bird ($299)**  *Before midnight (EST) on December 1st, 2015* | | | | | **Regular ($349)**  *Before midnight (EST) on January 8th, 2016* | |
| Address: | |  | | | | | | | | | Country: | | | |  | | | |
| City: | |  | | | Province/State: | | | | |  | | | | | Postal Code: | | |  |
| Contact: | | Home: |  | | Cellular: | | | | |  | | | | | | | | |
|  | | Work: |  | | Email: | | | | |  | | | | | | | | |
| Please indicate any dietary restrictions: | | | | |  | | | | | | | | | | | | | |
| Please indicate any special demands or needs: | | | | |  | | | | | | | | | | | | | |
| **LANGUAGE** | | | | | | | | | | | | | | | | | | |
| Language of choice for all future documents relating to the conference: | | | | | | | | | English  French | | | | | | | | | |
| **CERTIFICATE OF PARTICPATION** | | | | | | | | | | | | | | | | | | |
| Do you require a certificate of participation (Attestation of Continuing Learning Education)? | | | | | | | | | | | | | | | | Yes  No | | |
| **PAYMENT** | | | | | | | | | | | | | | | | | | |
| Please select your method of payment: | | | | | | Payment Amount: $ | | | | | | | | | | | | |
| VISA | | | | MASTER CARD | | | | | | | | | | CHEQUE | | | | |
| Card #: | | | | Expiry Date:      / | | | | | | | | | | 3-digit Security Code: | | | | |
| Name of Cardholder: | | | | | | | | Signature: | | | | | | | | | | |

****Please return the completed form either by e-mail at [conference@crdsc-sdrcc.ca](mailto:conference@crdsc-sdrcc.ca) or by fax at 514-866-1246 or toll-free at 1-877-733-1246 by December 1, 2015 for Student and Early Bird Registration. If space is still available, regular registration forms will be accepted until January 8, 2016. If paying by cheque please send to:

*Pursuing Excellence in Sport Dispute Resolution*

A public seminar hosted by CAS and SDRCC

Marriott Vancouver Pinnacle Downtown Hotel

1128 West Hastings Street

Vancouver, British Columbia, V6R 4R5

**February 11, 2016**

**REGISTRATION FORM**

Sport Dispute Resolution Centre of Canada

1080 Beaver Hall Hill, Suite 950

Montreal, QC H2Z 1S8

**Places are limited and are guaranteed only upon receipt of full payment.**