

**AUTHOR WORKSHOP REGISTRATION FORM**

**It is recommended, regardless of preferred payment method, that this form be printed, completed, and total fees sent by regular mail.**

Contact Information

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address: *(please provide as complete an address as possible)*  
\_\_\_\_\_

City/Town \_\_\_\_\_ Province/State \_\_\_\_\_

Postal/Zip Code \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Evening Phone \_\_\_\_\_ Fax Number and/or e-mail address \_\_\_\_\_

Workshop Information

*Indicate your workshop selection(s) by checking (✓) the appropriate box(es).*

**Breast Massage**

November 8 & 9, Toronto, Canada  
Instructors: Debra Curties, Pam Fitch

*Please indicate costs where applicable*

**Within Canada**

Regular fee: \$275 CDN *(after Oct 01, 2003)* \_\_\_\_\_  
Early fee: \$ 235 CDN *(before Oct. 01, 2003)* \_\_\_\_\_  
Mandatory text: *(\$47.95 + \$3.36 GST)* \_\_\_\_\_  
TOTAL \_\_\_\_\_

**From the United States**

Regular fee: \$200 USD *(after Oct 01, 2003)* \_\_\_\_\_  
Early fee: \$ 160 USD *(before Oct 01, 2003)* \_\_\_\_\_  
Mandatory text: *(\$36.95)* \_\_\_\_\_  
TOTAL \_\_\_\_\_

Method of Payment

*Indicate your preferred payment method by checking (✓) the appropriate box. **If you are paying by credit card and intend to submit this information via e-mail, for security reasons, two separate e-mails are recommended: one indicating the card number, and the next one indicating the expiry date.***

**Within Canada:**     Money Order     Cheque     VISA  
Card # \_\_\_\_\_    Expiry Date \_\_\_\_\_  
Signature \_\_\_\_\_

**From the U.S.:**     Money Order     Cheque     VISA     MasterCard  
Card # \_\_\_\_\_    Expiry Date \_\_\_\_\_  
Signature \_\_\_\_\_

[Click here to submit by E-Mail](#)

**Submit by regular mail to:**  
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Toronto, Ontario M5R 1V9  
Attn: Tanya-Lynn Paul