



Canadian Association of Professional Speakers
HALIFAX CHAPTER

www.canadianspeakers.org
www.CAPSHalifax.ca

CAPS Halifax Workshop Registration Form

Your Name _____

Organization _____

Mailing Address _____

City _____ Province _____ Postal Code _____

Contact phone number (Work) (_____) _____ (Home) (_____) _____

E-mail address _____

Check here to have your email added to CAPS Halifax's mailing list.
We hate spam and junk mail as much as you do. Your information will not be sold or given away.

Please write the name and date of workshop that you are registering for:

My total investment is (attach cheque): _____

Please check the appropriate box:

I am: a professional member of CAPS not a member of CAPS

Please make cheque payable to *CAPS Halifax* and mail to:

CAPS Halifax c/o Peter Davison, Treasurer CAPS Halifax
66 Doyle Street, Bedford, Nova Scotia B4A 1K5

Contact for Questions: Programming Chair
Margaret Holgate Tel: 902-456-6664 Email: margaret@lifeworkbalance.ca

Please check your email and our website to keep up to date on what CAPS Halifax can bring to your speaking and business. We can be found on the web at www.capshalifax.ca and have a blog at www.capshalifax.blogspot.ca.