

## **Registration Form**

Continuing Education Courses

PERSONAL INF	ORMATION (F	<b>PRINT CLEA</b>	RLY)				
LAST NAME			PREVIOUS LAST NAME	FIRST NAME		MIDDLE NAME	
HOME ADDRESS				CITY/TOWN		PROVINCE	
POSTAL CODE		COUNTRY		EMAIL ADDRESS		TELEPHONE	
STUDENT ID (IF APPLICABLE) DATE		DATE OF BIRT		SIN*			
STODENTID (IF APPLICABLE)		DATE OF BIR		5114			
		// MONTH DAY YEAR		* Effective 2019, Canada Revenue Agency (CRA) requires all designated educational institutions in Canada to file T2202			
		DAT TEAN	Tuition and Enrolment Certificates forms with the CRA. Subsection 237(1) of the Income Tax Act requires that you provide your SIN, upon request, to the preparer of the tax information slip. In order to meet this federal requirement,				
				you must submit your SIN			
COURSE DETAI	LS						
Information to complete the below section can be found here							
Course Code	Course Sectio		Course Na		Course Start Da	te Course Fee	
Eg. VP804	Eg. VP804 Eg. SY1		Eg. Venipuncture Techniques		Eg. July 10 <sup>th</sup> , 20	24 Eg. \$778	
	<u> </u>						
TOTAL AMO						\$	
HOW DID YOU H Michener We			Advortising				
			Advertising				
Colleague/Friend			Hospital News				
Other (please specify)			Poster or Flyer				
			Continuing Educat	Continuing Education Catalogue			
			Conference/Caree	Conference/Career Fair (please specify)			
			Magazine (please	Magazine (please specify)			
			External Website	External Website (please specify)			
				Other (please specify)			
DAVAALNT DET	A 11 C			···· //			
PAYMENT DET							
Payment Method Credit Card (Visa, AMEX, Mastercard) D				oit (In-person only)	Certified Cheque		
Cash (In-person only)				Money Order		(No Personal Cheques)	
IF CREDIT CARD PAYMEN	IT:						
					/ EXPIRY DATE		
CREDIT			EDIT CARD NUMBER	CARD NUMBER			
	CARDHOLDER SIGNA	TURE	CA	ARDHOLDER NAME (PLEASE PRINT) DATE			
The informa	ation on this form is co	ollected under the	e authority of the Michener Insti	itute of Education at UHN and will	be protected and used in	compliance with the Ontario Freed	

of Information and Protection of Privacy Act, R.S.O. 1990, c. F.31. Student information held by the Michener Institute of Education at UHN may be used for administrative and

# How to Use This Form

Use this form to register for any continuing education course – live, by distance or online Please do **not** use this form to apply to professional programs. A separate form is available at www.michener.ca/admissions/directly\_to\_michener Personal information

Please complete the personal information section using your **home address** as we will use this information to mail your receipt and any course materials as well as to contact you in case of course changes or cancellations.

#### **Course information**

Tell us which course(s) you'd like to take. Remember to **include** the entire **course code**, including the **section number**, where applicable (the number after the dash, e.g. rs810-2). Sections are used when courses are offered on different dates or to different customer groups.

#### **Payment method**

Total your course tuition and tell us how you wish to pay. We accept Visa & MasterCard, Certified Cheques and money orders (payable to the Michener Institute), Purchase orders and Ce Credits. You may also pay by Cash or Debit Card if you register in person during business hours.

### Send it in!

We'll gladly take your registration by fax, telephone, mail or in person during business hours (Mon. – Fri. 0900 –1700h). *Please note that we cannot reserve a space for you until we receive payment, and courses are filled on a first-come, first-served basis.* 

**Note:** Space is limited and registrations are accepted on a first-come, first-served basis. Late registrations are not guaranteed notification of course changes or cancellations. We reserve the right to make changes to program availability, schedules and requirements. We reserve the right to correct any typographical or printing errors. We treat your personal information with respect and do not rent, sell or trade mailing lists. We may contact you about your course registration and to keep you informed of other events at The Michener Institute.

Call (416) 596-3177 or Tollfree 1-800-387-9066 Fax (416) 596-3180 Email <u>regoffice@michener.ca</u>

The Michener institute 222 St. Patrick St., Toronto, Ontario M5T 1V4 <u>www.michener.ca/ce</u>

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statistical purposes of the Institute and/or the ministries and agencies of the Government of Ontario and the Government of Canada.

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