UHN Michener Institute of Education

Registration Form

Continuing Education Courses

PERSONAL INFORMATION (PRINT CLEARLY)

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 OF BIRTH	SIN*
	_____ / _____ / _____ MONTH DAY YEAR	_____

COMPANY NAME

** Effective 2019, Canada Revenue Agency (CRA) requires all designated educational institutions in Canada to file T2202 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 DETAILS

Information to complete the below section can be found here

Course Code	Course Section	Course Name	Course Start Date	Course Fee
Eg. VP804	Eg. SY1	Eg. Venipuncture Techniques	Eg. July 10th, 2024	Eg. $778
TOTAL AMOUNT				$ _____

HOW DID YOU HEAR ABOUT US?

- ☐ Michener Website
- ☐ Colleague/Friend
- ☐ Other (please specify)
- ☐ Advertising
  - ☐ Hospital News
  - ☐ Poster or Flyer
  - ☐ Continuing Education Catalogue
  - ☐ Conference/Career Fair (please specify) _____
  - ☐ Magazine (please specify) _____
  - ☐ External Website (please specify) _____
  - ☐ Other (please specify) _____

PAYMENT DETAILS

Payment Method

- ☐ Credit Card (Visa, AMEX, Mastercard)
- ☐ Cash (In-person only)
- ☐ Debit (In-person only)
- ☐ Money Order
- ☐ Certified Cheque (No Personal Cheques)

IF CREDIT CARD PAYMENT:

_____ CREDIT CARD NUMBER

_____ / _____ EXPIRY DATE

_____ CARDHOLDER SIGNATURE

_____ CARDHOLDER NAME (PLEASE PRINT)

_____ DATE

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 regoffice@michener.ca

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