Fax to:	**Bob Greenwood**
Fax #	**403-885-5120**

REGISTRATION FORM – CALGARY ALBERTA

REGISTRATION DEADLINE – OCTOBER 23, 2010

Bob Greenwood's 1 DAY Management Development Course

Shop Name			
Contact Person		**Tel. #**	
Course Date	**November 6th, 2010**	**Time:**	**8AM to 4PM**
Course Cost	**$309.75 per person (includes 14.75 GST)**		

Payment Options ✓one		**Cheque**		**Visa**		**M\C**				**Charge to my APD Account**

Course must be paid in advance to secure your seat

Make Cheque Payable to: **Automotive Parts Distributors and mail to P.O. Box 783, Red Deer Alberta T4N 5H2**
Attention: Bob Greenwood Course

My signature below authorizes a charge to my credit card in the amount of: $_____

Signature: _____ Name on Card_____

Card # | | | | | | | | | | | | | | | | **Expiry** | | | **mm\yy**

Print Clearly

Business Name: _____

Business Address: _____City _____P\C_____

Telephone: Bus: (_____)_____Fax: (____)_____

Bus. Email: _____Home. Email:_____

Student's Name: _____
First Last

Home Address:_____CITY_____P\C_____`

Telephone: Res (_____)_____ ***One Registration form per student***

Signature:_____

This fee is for the course only. Accommodations in Calgary will be announced and the attendees are responsible for booking and paying for their own rooms. I also understand that by signing this form, we agree that any or all registrations are non-refundable or transferable after the registration deadline. Registrants may however be substituted up to 10 days prior to the start date of the course.

I UNDERSTAND THAT ALL REGISTRATIONS ARE NON-TRANSFERRABLE AND NON-REFUNDABLE:

INITIAL _____