

Prairie Institute of Expressive Arts Therapy

1528 12th Ave SW, Calgary, Alberta T3C 0P9

Phone: (403) 245-5553

www.pieat.ca

REGISTRATION FORM

TITLE OF WORKSHOP: _____

WORKSHOP DATES: _____

NAME: _____

EMPLOYER: _____

WORK ADDRESS: _____

PHONE: (W) _____ (C) _____

EMAIL: _____

*Please make cheque out to **Prairie Institute of Expressive Arts Therapy** and mail to:

1528 12th Ave SW
Calgary, AB T3C 0P9

OR

Email Transfer to carmenr@telusplanet.net

*Cancellation Policy: \$30 Administration fee for all refunds. No refunds one week prior to date of workshop.

*NSF Cheque - \$20 charge