



# Saskatchewan Economic Development & Leadership Forum November 24-25, 2021

### INDIVIDUAL REGISTRATION FORM

Submit by fax 306-500-9863 or email seda@seda.sk.ca

## Refer to the next page to REGISTER A GROUP

ATTENDEE INFORMATION						
Name:	Title:					
Company/Organization:						
Mailing Address:						
City:		Province:	Postal Code:			
Phone: F		ax: Email:				
INDIVIDUAL REGISTRATION FEE						
Register by October 15 and you qualify for the early registration discount <b>and</b> receive a conference welcome kit by mail.						
		Until October 15	After October 16			
	SEDA MEMBER	\$160 + GST = \$168.00	\$225 + GST = \$236.25			
	NON-MEMBER	\$225 + GST = \$236.25	\$285 + GST = \$299.25			
PAYMENT						
Cheque Enclosed □ Visa □ MasterCard □						
Name on Card:						
Card Number: Expiry Date:						
3 Digit Security Code (on back of card):						
Signature:						
Billing Address (if different from above):						
GENERAL INFORMATION						

- 1. Registrants will be contacted prior to the forum to select their choice of concurrent sessions.
- 2. **Cancellation Policy:** Refunds will be made on cancellations received prior to October 15. An administration fee of \$20 will be applied. No refunds will be made after October 15, 2021.
- 3. Forum program is subject to change.





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## **GROUP REGISTRATION FORM**

Submit by fax 306-500-9863 or email seda@seda.sk.ca

GROUP MAIN POINT OF CONTACT						
Name:	:: Title:					
Company/Organization	on:					
Mailing Address:						
	Province: Postal Code:					
Phone:	Fax:	Email:				
GROUP REGISTRATION PACKAGE						
SEDA MEMBER NON-MEMBER	Until October 15 \$550 + GST = \$575.50 \$720 + GST = \$756.00	Register by October 15 and you qualify for the early registration discount <b>and</b> receive a conference welcome kit by mail.	<b>After October 16</b> \$620 + GST = \$651.00 \$790 + GST = \$829.50			
ATTENDEES						
Register a maximum of eight individuals (includes Main Point of Contact) within your group						
Name:	ame:Email:					
Name:	ame:Email:					
lame:Email:						
Name:Email:						
Name:Email:						
Name:	ame:Email:					
Name:	ame:Email:					
PAYMENT						
Cheque Enclosed □ Visa □ MasterCard □						
Name on Card:						
Card Number:	ard Number: Expiry Date:					
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