

SPRING FLING 2024 REGISTRATION FORM SATURDAY, APRIL 6, 2024

SATURDAY, APRIL 6, 2024 CANAD INNS - CLUB REGENT AMBASSADOR EVENT ROOMS

PLEASE PRINT CLEARLY!

NAME:	PLACE OF EMPLOYMENT:
EMAIL:	
PHONE #:	WORK PHONE #:
ATTENDING EVENIE	G RECEPTION? YES NO
2024 FEES	
PLEASE CHECK Cash Cheque	\$65 [PROOF OF MEMBERSHIP REQUIRED] NON MAMLS MEMBER: \$110 OFF YOUR PAYMENT OPTION Payable to: Capital Region Academy er - rebizant.sf2024@gmail.com
Tar Her Her MS	tion Form & payment to: a Brown or Karey Lachuta natology Laboratory olth Sciences Centre 559 - 820 Sherbrook Street nipeg, Manitoba R3A 1R9
	a photocopy of your 2024 CSMLS/MAMLS card if applicable fee will not be accepted without proof of membership
	registration will be emailed. Please include your email address in details. Please write legibly.
Receipts for pa presentation or	yment and CE Certificates will be available at the end of the last event day.
♦ Enrollment is li	nited to 150 people
•	se contact: Marlene Rebizant <u>marlenerebizant@gmail.com</u> adline: Monday, March 25, 2024
♦ Doors open at	Sam April 6th, 2024 - first presentation at 08:30
DIETARY RESTRICT	ONS: