## **Registration Form**

This form does not take the place of the prior approval process and forms within each ministry. Registrants are reminded that they must complete the appropriate approval steps in their own ministries.

Participant Name:		Participant Phone Nu	mber:	
Participant Ministry:		Participant work email address:		
Dietary or Accomodation Requi	rements (if applicable):			
	Workshop Name		Date (mm/dd/yyyy)	Cost
	confirms that the ministry wil	ll pay the full invoiced registration	cost for the individual being regist	ered <b>, if</b> a cost
is involved.  Where there is a cost for a class ministry will remain responsible		ot require payment if cancelled 30 of ant's fees.	days or more, prior to the class. Ot	herwise the
Name of Approver	 Date		Signature of Approver	
Registrations for those without	access to Learn can be email	ed to learn@gov.sk.ca		
<b>1</b>   P a g e				

