



## SYMPOSIUM REGISTRATION FORM

Name:	<input type="text"/>	Telephone Number:	<input type="text"/>
Position:	<input type="text"/>	Email/Web Address:	<input type="text"/>
Organization:	<input type="text"/>	Address:	<input type="text"/>

**I am also registering the following people from my organization:**

Name:	<input type="text"/>	Name:	<input type="text"/>
Position:	<input type="text"/>	Position:	<input type="text"/>
Telephone Number:	<input type="text"/>	Telephone Number:	<input type="text"/>

### SYMPOSIUM FEE

Please note – the fee includes food and refreshments

# Of People Attending:  X \$50.00 =

Payment: American Express  VISA  Cheque\*  \*Make cheque payable to:  
**Neighbourhood Link/Senior Link**  
and submit with registration form

Name on Credit Card:

Expiry Date:  mm/yyyy

Signature:

To register, mail or fax your form with payment by Friday, March 18, 2005 to:

**Symposium: From Idea to Action**  
**Neighbourhood Link/ Senior Link**  
2625 Danforth Avenue  
Toronto, ON M4C 1L4  
Fax: 416-691-8466

For your security, we are NOT able to accept registration/ financial information by e-mail.