

REGISTRATION FORM

Legal Name:		Preferred Name:	
Address:			
City:	Prov:	Postal Code:	
Email:		Phone #: ()	
		Cell #: ()	
Parish (include city/town):			

I would like to register for	The Genesis Project	Cost
	Package – All four events	\$150.00
	Introductory Concert - Friday, September 22, 2017	\$10.00
	Session #1 - Saturday, September 23, 2017 (lunch included)	\$110.00
	Session #2 - Saturday, November 25, 2017	\$60.00
	Concert - Saturday, January 27, 2018 (tentative date)	\$10.00
Total		

Please complete if registering for Workshop #1:

Are there any special dietary requirements?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Specify:
Vegetarian:	<input type="checkbox"/> No	<input type="checkbox"/> No: but no red meat	<input type="checkbox"/> Vegan
	<input type="checkbox"/> Yes: but will eat: chicken <input type="checkbox"/> fish <input type="checkbox"/> eggs <input type="checkbox"/> dairy <input type="checkbox"/>		
Food allergies:			
Carries Epipen®:	Yes <input type="checkbox"/> No <input type="checkbox"/>		

- i. The Diocese of Niagara reserves the right to use print and digital images and videos of all program participants in our advertising, marketing, websites and through social media UNLESS provided with a written document withholding permission.
- ii. The Diocese of Niagara is committed to protecting the confidentiality, privacy and accuracy of personal information it collects. The information gathered in this form will be used solely to support the participant's involvement with the Diocese of Niagara and will not be disclosed to a third party except in a medical emergency.

Signature of Participant

Date

**Please sign and return this form with payment to:
Jane Wyse, Diocese of Niagara, 252 James St. N., Hamilton, ON L8R 2L3 or 905-527-0963 A.S.A.P.**