

EDUfest 2014 Mail-in Registration

Title of Workshop: _____

Date(s) of Workshop: _____

Location: _____

Participant Name: _____ Professional I.D. #: _____

Teacher: *Yes / No* OR Substitute Teacher: *Yes / No* Other: _____

Pre-service Teacher: *Yes / No* University: _____

School Board: _____ School: _____

Home Address: _____ Postal Code: _____

Summer Address (if different than above): _____ Postal Code: _____

Home/Summer Email Address: _____ Home/Summer Telephone Number: _____

Work Email Address: _____

Important Information about Mail-in Registrations:

This is not a confirmation of registration; you have not officially registered for this workshop.

- When your registration form and payment have been received, a confirmation will be sent to you by email.
- There is no guarantee that there will be an availability of seats in this workshop by the time your registration reaches us.

Payment: Your mail-in registration form must be accompanied by a cheque or money order made payable to "Minister of Finance."

Please mail form(s) complete with cheque or money order to

Department of Education and Early Childhood Development
English Program Services
Attention: EDUfest Support
Brunswick Place
2021 Brunswick Street, PO Box 578
Halifax, NS B3J 2S9

Note: Faxes are not accepted