Fall 2025 Program Registration Form:

Name & Member Number: _____

Program Name: **Program Cost:**   **Session # / Dates**

1_____   _____   _____

2_____   _____   _____

3_____   _____   _____

4_____   _____   _____

5_____   _____   _____

6_____   _____   _____

7_____   _____   _____

8_____   _____   _____

9_____   _____   _____

New Member for Rest of 2025 and All of 2026: YES or NO (circle one) $93.00

Already a 2025 member and paying for 2026? YES or NO (Circle one) $60.00

_____

For Reception Staff ONLY: **Program Sub-Total**:   **$ _____**

                          Membership Sub-Total $ _____

                          TOTAL: **$_____**

Paid by (cash, debit, credit, cheque):_____