

OFFICIAL REGISTRATION FORM



People. Productivity. Prosperity: Succeeding in a Diverse Workplace
Canadian Institute of Management 68th Annual Conference
Sheraton Hamilton Hotel, Hamilton, Ontario • June 10-12, 2010



Name

Address Office Home

City Prov P/C

Phone - - Fax - -

E-mail

Companion's Name

Please note how you would like to receive your confirmation: by e-mail by Fax by Mail



REGISTRATION FEES:	EARLY BIRD On or before May 1st	REGULAR RATE After May 1st	TOTAL \$
<input type="radio"/> Full Conference	\$428.57 + \$21.43 GST = \$450.00	\$471.43 + 23.57 GST = \$495.00	\$ _____
<input type="radio"/> Companion/Spouse	\$328.57 + 16.43 GST = \$345.00		\$ _____
<input type="radio"/> Additional Friday Dinner & Entertainment No. of tickets: _____ @ \$60.00 + \$3.00 GST = \$63.00 per person			\$ _____
<input type="radio"/> Additional Friday Professional Development Symposium: <i>People. Productivity. Prosperity: Succeeding with a Diverse Workforce</i>			
Non-Members: No. of tickets: _____ @ \$189.52 + \$9.48 GST = \$199.00 per person			\$ _____
CIM Members: No. of tickets: _____ @ \$160.95 + \$8.05 GST = \$169.00 per person			\$ _____
<input type="radio"/> Additional President's Gala Tickets No. of tickets: _____ @ \$80.95 + \$4.05 GST = \$85.00 per person			\$ _____
			TOTAL \$ _____

Special Dietary Requirements: _____

<p>FULL CONFERENCE REGISTRATION INCLUDES:</p> <ul style="list-style-type: none"> • Welcome Reception (Thursday) • Professional Development Symposium • 2 Breakfasts • 2 Lunches • Sit Down Dinner and Entertainment (Friday evening) • President's Gala (Saturday evening) 	<p>COMPANION'S REGISTRATION INCLUDES:</p> <ul style="list-style-type: none"> • Welcome Reception (Thursday) • 2 Breakfasts • Experience Hamilton Friday and Saturday Excursions • Shopping in Jackson Square • President's Gala (Saturday) 	<p>PROFESSIONAL DEVELOPMENT SYMPOSIUM INCLUDES:</p> <ul style="list-style-type: none"> • 2 Nutrition Breaks • Lunch • All workshops • International Keynote Speaker
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Cheque enclosed \$ _____ or Charge to

Credit Card #:

Expiry Date: /

Signature: _____

Please remit form(s) and payment to:
Canadian Institute of Management
2010 Annual Conference
 P. O. Box 36622, RPO Eastgate
 Hamilton, ON L8E 5B2
 Attn: Lynda Murdoch-Furchner
 Tel: 905-561-9889 Fax: 905-561-5995
 Email: admin@cim-hamilton.com
 Hotel Bookings: www.starwoodmeeting.com/book/CIM2010

CANCELLATION POLICY: Refunds will be issued for cancellations of registrations and ticketed events received in the CIM Office prior to May 15, 2010. No refunds will be issued after this date. Substitutions accepted.

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	Date
Received by Office	_____
Date Entered	_____
Payment Processed	_____
Confirmation sent	_____
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