



Workshop Selection Form

Please email or fax completed registration form to:

Conference Program Committee,
Tides of Change, Box 26008, 281 St. George Street, Moncton, NB, E1E 4H9.

You can reach us by email at tidesofchange2014@yahoo.ca

Place indicate which workshop you are registering for.

	Wed. AM Series A (11–12:30)	Wed. PM Series B (1:45–3:15)	Wed. PM Series C (3:30–5:00)	Wed. PM Series D (1:45–5:00)
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Option #1	_____	_____	_____	_____
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Option #2	_____	_____	_____	_____
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Thursday
Series FD (9– 4:30)

Lorraine Fox _____

	Thursday AM Series E (9– 10:30)	Series F (9–12:30)	Series G (11–12:30)
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Option #1	_____	_____	_____
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Option #2	_____	_____	_____
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	Thursday PM Series H (1:45–3:15)	Series I (1:45–5:00)	Series J (3:45–4:45)
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Option #1	_____	_____	_____
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Option #2	_____	_____	_____
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	Friday AM Series K (9:00–10:30)	Series L (9:00–12:30)	Series M (11:00–12:00)
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Option #1	_____	_____	_____
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Option #2	_____	_____	_____
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IMPORTANT – Please indicate method of payment

Check/money order (accompanying registration) _____

Check/money order (paid at door) _____ Credit card (prepaid) confirmation # _____