



Special Events Registration Form 2016/2017

Call 780.428.1111 for additional information.



CONTACT INFORMATION

School/Group Name: _____ Office email: _____

1st CONTACT Position First Name Last Name Email

2nd CONTACT Position First Name Last Name Email

TELEPHONE Daytime Cell Fax

ADDRESS Street/Box No. Town/City Postal Code

EVENT INFORMATION

Requested Date Choice	Event Start/Finish Time	# of Attendees	Meals Required (Options available on our website)
1 st –			Breakfast Option # _____
2 nd –			Lunch Option # _____
3 rd –			Supper Option # _____
			Snack Option # _____

Additional Information: _____

AV Requirements: _____

Please inform us of any dietary requests or concerns prior to arrival.

Dietary restrictions: _____



Special Events Registration Form 2016/2017

Call 780.428.1111 for additional information.



PAYMENT INFORMATION

***Note: A deposit (see below) is required when booking is confirmed with Metro/Bennett Staff, with the balance to be invoiced after the stay. For events requiring room rental only, payment is required in full at the time of booking.**

Special Event Deposits - Approximately 25%

Contracts Under \$1000	\$250
Contracts Under \$2000	\$500
Contracts Under \$3000	\$750
Contracts Under \$4000	\$1,000
Contracts Under \$5000	\$1,250
Add \$250 for each \$1000 increase over \$5000	

Total cost: _____

Method of Payment: _____ Cash _____ Cheque (payable to Edmonton Public Schools) _____ Credit Card _____
Budget/SGF

NAME OF CARDHOLDER: _____ AUTHORIZED SIGNATURE: _____

CARD NUMBER _____ Expiry Date _____ / _____
(*EPS Schools should not be using their school credit card)

Budget Funds – EPS ONLY

Account Code 800601 Cost Centre _____ Program _____ Activity _____. (This will be processed by Journal Voucher)

SGF Funds – EPS ONLY

1. Please provide a SGF cheque with the stub attached using Acct # 2100 **or**
2. Account Code 101501 Cost Centre _____ Program _____ (34001-34801) Activity 800001.
(This will be processed by Journal Voucher to the schools School to Pay account)

MAIL to: Metro Continuing Education, 7835 - 76 Avenue, Edmonton, AB T6C 2N1 (or Truck mail for EPSB) or **FAX** to: 780.428.1112.

CANCELLATION POLICY

To withdraw from a program with a full refund, please email metro@epsb.ca at least 60 business days prior to your program date. Withdrawal requests after the 60 days will result in a refund less 50% of the cost of the program.