CLE REGISTRATION FORM

This 2-PAGE form is for individual registrations only. For group registrations, please call 416-597-9724.
Please complete and submit by email osgoodepd@osgoode.yorku.ca, fax (416) 597-9736,
or mail to Osgoode Professional Development, 1 Dundas West, 26th Floor, Toronto, Ontario, M5G 1Z3

Program Information		
Program Name		
Program Date		
Attendance Option (Please refer to program brochure/website for options available)		
Registrant Information		
First Name		
Last Name		
Position Title		
Year of Call (if applicable)		
Areas of Interest *(Please select 3):*	☐ Aboriginal Law ☐ Administrative Law ☐ Alternative Dispute Resolution ☐ Advertising & Marketing Law ☐ Bankruptcy & Insolvency ☐ Banking & Financial Services Law ☐ Charities & NFP Law ☐ Class Actions ☐ Construction Law ☐ Business/Corporate Law ☐ Competition Law ☐ Constitutional & Human Rights Law ☐ Criminal Law ☐ Civil Litigation ☐ Education Law ☐ Elder Law ☐ Entertainment & Sports Law ☐ Environmental Law ☐ Family Law	☐ Health Law ☐ In House Corporate Counsel ☐ Immigration Law ☐ Insurance Law ☐ International Law ☐ Intellectual Property Law ☐ IT & Tech Law ☐ Labour & Employment Law ☐ Municipal Law ☐ Negligence/Tort Law ☐ Natural Resources/Energy Law ☐ Pension & Benefits Law ☐ Personal Injury Law ☐ Privacy & Access to Info ☐ Procurement/Purchasing Law ☐ Real Property Law ☐ Securities Law ☐ Tax Law ☐ Wills,Estates & Trusts Law
Primary Practice Area		
Please send me promotional material regarding upcoming programs in my select areas of interest via:	☐ Email ☐ Direct Mail ☐ I do not want to receive promotional email/mail	

Company/Firm/Organization Information	
Company/Firm/Organization Name	
Full Mailing Address (including City, Province, Postal Code)	
Telephone	
Email Address	
Secondary Email Address to be included in registration communication *(Example: Assistant)*	

Payment Information	
☐ Cheque enclosed (**payable to York University** — HST# R119306736)	
Bill my credit card: ☐ VISA ☐ Mastercard	
Cardholder name	
Card Number	
Expiry	
Signature	
Payment amount	$
NOTES (Extra Registration Details)	
(i.e. dietary restrictions, GST/HST exemption number, discount codes):	

Please see the program brochure/website for its Cancellation and Substitution policy.

SUBMIT VIA EMAIL

PRINT