

VISION British Columbia

Sunday, September 17, 2017

8:00 am - 5:15 pm

Sheraton Vancouver Airport Hotel - 7551 Westminster Hwy.
Richmond, B.C.

First Name _____ Last Name _____

License Number (if applicable) _____

Educational Institution (if applicable) _____ Student Number (if applicable) _____

Business Name (if providing business address) _____

Address _____

City & Province _____ Postal Code _____

Daytime Phone # _____ Email* _____

** A registration confirmation will be sent to the email address provided on this registration form.*

BECOME AN OAC MEMBER FOR BEST RATES AND FREE ONLINE CE (www.opticians.ca ; Ph. 1-800-847-3155)

REGISTRATION

- Pre-registration is available until September 11. After September 11, individuals must register on-site on Sunday, September 17.

- Registration fees below are effective until September 11. On-site registration fees increase by \$25.00.

Registration fees include:

- OAC Member & Non-Member fees include con ed credits for lectures attended in full & lunch

- Students, non-licensed individuals enrolled in an accredited Optical Training Program for the 2017 academic year, are no-charge to attend lectures, but must pay if they wish to have lunch at the event. The cost of lunch is \$30.00.

** Hotel rooms available at \$169.00 per night under the Opticians Association of Canada. Book before August 16, 2017**

REGISTRATION FEES (effective to September 11)

		TOTAL
OAC Members	\$99.00 + \$4.95 GST = \$103.95	\$ _____
Non-OAC Members	\$175.00 + \$8.75 GST = \$183.75	\$ _____
Students	No Charge	No Charge
	Student Lunch ticket—\$30.00 EACH	\$ _____

PAYMENT OPTIONS: (check one)

Cheque ____ **Money Order** ____ **VISA** ____ **Mastercard** ____

TOTAL \$ _____

CREDIT CARD # _____ Expiry Date _____

Name of Cardholder _____ CVV# _____

Signature of Cardholder _____

I authorize the Opticians Association of Canada to charge my credit card in the amount of \$ _____

CHEQUES & MONEY ORDERS MUST BE MADE PAYABLE TO "OPTICIANS ASSOCIATION OF CANADA" AND SENT IN WITH THIS REGISTRATION FORM.

RETURN COMPLETE REGISTRATION FORMS BEFORE SEPTEMBER 11TH TO:

Fax: 204.947.2519 | Email: info@opticians.bc.ca

Mail: OAC - BC Chapter, 2706-83 Garry Street, Winnipeg, MB R3C 4J9

