



**Mail to:**  
**Box 1300**  
**Fort Macleod, AB.**  
**T0L 0Z0**  
**403-553-4106**  
[www.willowcreeklearning.ca](http://www.willowcreeklearning.ca)  
[office@willowcreeklearning.ca](mailto:office@willowcreeklearning.ca)

## **Registration Form** **(please PRINT)**

Name: \_\_\_\_\_

Phone: (day) \_\_\_\_\_ (eve.) \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Name of Course: \_\_\_\_\_

Located in: (town) \_\_\_\_\_ Start date: \_\_\_\_\_

Fee: \$ \_\_\_\_\_ CHEQUE # \_\_\_\_\_

Your Signature: \_\_\_\_\_

Please complete and mail this form with your fee to Willow Creek Adult Learning. **Make cheques payable to Willow Creek Adult Learning - a separate cheque for each course please.**

This form completes your registration and confirms your place in class **unless you are told otherwise.** Cheques will be deposited one week prior to start date of course.