



**Registration Form**  
**Adult Programs**  
**Leadership Department**

Places are limited - Register now !  
\$50.00 registration fee  
Amount payable in cash or by cheque to : YWCA Montreal

Family name: \_\_\_\_\_ First name: \_\_\_\_\_ Age : \_\_\_\_\_

☎ Home : \_\_\_\_\_

☎ Office : \_\_\_\_\_

☎ Cell : \_\_\_\_\_

📍 Address : \_\_\_\_\_

✉ E-mail : \_\_\_\_\_

Training / Education : \_\_\_\_\_

Current Job : \_\_\_\_\_

Method of payment :  Cheque  Cash

Program / Workshop : \_\_\_\_\_

Themes I would like to be adressed in the workshops :  
\_\_\_\_\_  
\_\_\_\_\_

<p><b>How did you hear about our programs ?</b></p> <ul style="list-style-type: none"> <li>• <input type="checkbox"/> Word of mouth (family, friend, employer, other) _____</li> <li>• <input type="checkbox"/> Employee, participant or volunteer at the YWCA _____</li> <li>• <input type="checkbox"/> Health professional (doctor, social worker, nurse) _____</li> <li>• <input type="checkbox"/> YWCA website</li> <li>• <input type="checkbox"/> Publicity (classified ads, brochure, other) _____</li> <li>• <input type="checkbox"/> Other _____</li> </ul> <p>I am interested in receiving by mail or e-mail information regarding the different programs offered at the YWCA Montreal : Yes <input type="checkbox"/> No <input type="checkbox"/></p>
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**QUESTIONS – INFORMATION**  
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