

Learning & 
Development
Conference

**September 22 - 23, 2020** Sheraton Centre Toronto Hotel Toronto, ON, Canada

## 2020 DELEGATE REGISTRATION FORM

## **LEARNINGTRAININGCONFERENCE.CA**

MediaEdge

REGISTRATION OPTIONS AND PRICING			Until August 7, 2020		After August 7, 2020	\$ TOTAL
ONLINE L&D (SEPTEMBER 22 - 23) Includes: All Conference Sessions and Plenaries, Breakfasts, Lunches, Coffee Breaks, Exhibition Floor Access, Opening Reception (September 22)			□ \$499		□ \$549	
ONE DAY - L&D (SEPTEMBER 22 or 23, 2020) Includes: All Conference Sessions and Plenaries, Breakfasts, Lunches, Coffee Breaks, Exhibition Floor Access, Opening Reception (September 22)			□ \$299		□ \$349	
**Registration fees are in Canadian Funds					SUB-TOTAL	
REGISTRATION FORM FIELDS						
FIRST NAME		LAST NAME				
TITLE (i.e. President, Professor)	INSTITUTION/OR	GANIZATION	COMPANY NA	ME		
DESIGNATION: (CTDP, CTP)						
MAILING ADDRESS						
CITY	PROVINCE/STATE			COUNTR	RY	
POSTAL CODE/ZIP CODE		TELEPHONE	(with area code	and exter	nsion)	
-SITE MOBILE NUMBER (incl. area code) EMAIL		EMAIL				
PROFILE QUESTIONS						
What type of organization do you work for?	What type of industry do you w	ork in?		Are you a □ Yes	Corporate Training/Learnin	g provider?
□ For Profit □ Non Profit □ Government □ Independent / Consultant □ Other (please specify)  How long have you worked in the industry? □ 0 - 5 years □ 6 - 12 years □ 12 + years  What area of performance and learning do you work in? □ Facilitation □ Instructional Design □ Multimedia Development □ Performance Consulting	☐ Financial ☐ Construction / Trades ☐ Food Industries ☐ Military / Services ☐ Telecommunications ☐ Gas / Electrical ☐ Academic ☐ Technology ☐ Other (please specify)		If so, please tick the relevant box  Content Delivery Service A combination of the above Channel / Consulting Industry Supplier Other (please specify)  Do you give Learning & Training 2020 permission to post photos/videos of you taken at the conference? Yes No			
☐ Senior Leader ☐ Other (please specify)  Do you have any severe food allergies? (i.e. nuts, dairy, etc.). Ple Do you have any specific accommodations (i.e. hearing impairm						
Please add me to your list to receive the following emails:  ☐ Please email me information on future L&D events ☐ Please sign me up to receive the weekly L&D E-Newsletter ☐ Please email me information on L&D products or services	ient, mosility etc). Hicease speelify	•				
Your email will not be provided to any third party and you can unsubscribe at any time.						
METHOD OF PAYMENT						
□ VISA □ MASTERCARD □ AMERICAN EXPRESS □ CHEQUE PAYABLE TO MediaEdge Communications **Canadian Funds	Sub Total \$ Add 13% HST				E WAYS TO REGI	STER:
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Security Code (CVV):	TOTAL \$				nis form to: 6-512-8344	
Name on card:	NOTE: "MEC" will appear on your cred CANCELLATION POLICY: A written e				his form to: diaEdge Communications	Inc.
Expiry:	your intent to cancel or substitute you Show registration due to illness, the fu	ur registration. If ull amount can be	you cancel your e applied to your	Att	L&D Conference n: Brad Moore, Director, Sh	•
Signature:	2021 Show registration or you can tranto another person who will attend to Normal processing fees will be waive	the 2020 Show in ed if you exercise	in your absence. e either of these		01 Sheppard Avenue East, onto, ON M2J 4Z8	Suite 500
For additional registrations, please photocopy this form.	two options. Refunds will not be issue cancellation or substitution prior to t the Show. If the 2020 Show is cancel applying their delegate registration five free reimbursed in full. Please ser or substitutions via email to Brad Modat: bradm@mediaedge.ca	ou do not attend ave the option of Show or to have n of cancellations				