



## Registration Form

**The Pines Retirement Home – Home Care Aide Course (27 FEBRUARY 2018)**

**Deadline for submission is Monday 12 February 2018**

**Full Name \***

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**First Name**

**Middle Name**

**Surname**

**Address \***

--

**Street Address**

--

**Street Address Line 2**

--	--

**City**

**State/ Province**

--

**Postal / Zip Code**

--

**Country**

**Phone Number \***

--

**Area Code**

--

**Phone Number**

**Email**

**Address \***

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**Amount of Deposit Paid CI\$ \_\_\_\_\_**

**Course Paid in Full CI\$450.00 (please circle)    Y    N**

\_\_\_\_\_  
**Signature**