



Delegate Registration Form



40 Atlantic Region Aircraft Maintenance Conference (ARAMC)

Primary Attendee Information:

Name:	Company:
Street Address:	City, Province/State:
Postal/Zip Code:	Telephone:
Fax:	Email:

Additional Persons Attending:

Name:
Name:
Name:
Name:

Registration Fees:

# of Delegates Attending:	@ \$140 (\$121.74 + HST \$18.26)	TOTAL:	\$
PLEASE NOTE: ONLY THE DELEGATE REGISTRATION FEE INCLUDES A BANQUET TICKET FOR THE GALA DINNER, ADDITIONAL TICKETS MAY BE PURCHASED AT \$70 PER BANQUET TICKET			
# of Students Attending:	@ \$40 (\$34.78 + HST \$5.22)	TOTAL:	\$
# of Additional Banquet Tickets Required:	@ \$70 (\$60.87 + HST \$9.13)	TOTAL:	\$
Grand Total:			\$

Payment Information

HST # 1000922741RT0001

Cheque: If paying by cheque, please make payable to AME ASSOCIATION (ATLANTIC) INC. and mail to address below.

Visa/Mastercard #:

Expiry Date:

Name on Card:

REFUNDS WILL NOT BE ISSUED WITHIN 7 DAYS OF THE CONFERENCE. PAYMENT MUST BE RECEIVED PRIOR TO START OF THE CONFERENCE.

The Westin Nova Scotian - Halifax, NS - April 18th - April 20th, 2018

Anneke Urquhart, Chair
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 Phone: 902-223-5592

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 Mail to: ARAMC 2018
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