



**Canadian Mental
Health Association**
Durham

Tel: 905-436-8760
Fax: 905-436-8761
Website: www.cmhadurham.ca
Email: cmha@cmhadurham.org

Workshop Registration Form

Each Registration form MUST BE COMPLETED IN FULL to be processed

Participants' information

Name:		Phone:
Email:		
Mailing Address:		
City, Province:		Postal Code:
If your Agency is submitting payment, please provide Agency Information		
Agency Name:		
Billing Address:		
City, Province:		Postal Code:
Agency Phone Number:		
Workshop Name	Date <i>*please fill in</i>	Price
ASIST		\$180.00
Suicide safeTALK		\$50.00
Mental Health First Aid		\$180.00
MHFA for Youth		\$190.00
Payment in full is required before the scheduled workshop		
Invoice Agency:		
Cheque or Money Order Enclosed –Payable to: CMHA Durham - 60 Bond Street West, Oshawa ON L1G 1A5		

***Note:** if you are unable to be present for all hours of the workshop, you will not receive your certification. You cannot re-take the missed time and will be required to re-take the entire workshop, at your expense, in order to receive your certification.