

MLA Committee – Regional Meetings

SESSION REGISTRATION FORM

PLEASE PRINT CLEARLY

Organization: _____ (if AGLC ID #: _____ available)
Address: _____
Mailing Address _____
City/Town _____ Postal Code _____

Please provide the name, email address (**preferred**) and phone number of the contact person for this registration.

PLEASE PRINT CLEARLY

Contact Person's Name _____ Contact Person's Email Address (required to confirm registration) _____
() _____ () _____
Contact Person's Daytime Phone Number _____ Contact Person's Alternate Phone # (optional) _____

Participants' Names (PLEASE <u>PRINT</u> CLEARLY)	Session(s) Being Requested		
	City/Town	Date	Time

The session schedule is available on the AGLC website: aglc.ca
All sessions have limited seating, and registration is required. The sessions are FREE.

HOW TO REGISTER:

Please register on or before September 25, 2009. FAXING IS RECOMMENDED DUE TO TIME CONSTRAINTS.
FAX THIS FORM TO 780-447-8950 (OR MAIL TO: **MLA COMMITTEE**, 50 CORRIVEAU AVENUE, ST. ALBERT, AB T8N 3T5)
APPLY FOR AN AGLC INTERNET ACCOUNT AND REGISTER ON-LINE.
YOU WILL BE CONTACTED REGARDING AVAILABILITY AND CONFIRMATION OF REGISTRATION BY SEPT 30.

FOR MORE INFORMATION:

Telephone Inquiries: 1-800-577-2522
Email Inquiries: milaconsult@aglc.ca

The information you are providing on this application form is collected under the authority of the *Gaming and Liquor Act*, Gaming and Liquor Regulation, and the *Freedom of Information and Protection of Privacy (FOIP) Act*, section 33(c). The information is strictly for the use of the Alberta Gaming and Liquor Commission.

Your personal information is protected by Alberta's FOIP Act and can be reviewed upon request. If you have any questions about the collection or use of the information, please contact Alberta Gaming and Liquor Commission, 50 Corriveau Avenue, St. Albert, AB T8N 3T5 Telephone: 780-447-8600 Toll-free: 1-800-272-8876.

Space available: <input type="checkbox"/>	Confirmation provided by email <input type="checkbox"/> or by phone <input type="checkbox"/> Date: _____	Entered: <input type="checkbox"/>
Space NOT available: <input type="checkbox"/>	Notification provided by email <input type="checkbox"/> or by phone <input type="checkbox"/> Date: _____	

