REGISTRATION FORM

Manitoba Council of Administrative Tribunals Inc.

Decision Writing Training

Tuesday, April 21, 2015

Surname	Given Name	
Position/Title in Tribunal/Board (e.g. Chair, Member)	
Name of Tribunal/Board		
Address (Street, City, Postal Coo	de)	
Phone No.	E-mail	
Please advise of any dietary or other a	ccommodation requirements.	

Please send a \$50.00 <u>cheque made payable to the Manitoba Council of Administrative Tribunals Inc.</u> together with this Registration Form to:

Manitoba Justice Civil Legal Services c/o Bernadine Loran 730-405 Broadway Winnipeg MB R3C 3L6

For further information about this Training, please contact Bernadine Loran at bernadine.loran@gov.mb.ca or 204-945-0309