

Community Living Access  
David Pitonyak  
Toolbox for Change: Reclaiming Purpose, Joy and Commitment in the  
Helping Profession

Registration Form

Agency: \_\_\_\_\_

Address: \_\_\_\_\_

Attendees:

1. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Dietary Restrictions? Please explain: \_\_\_\_\_  
\_\_\_\_\_

2. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Dietary Restrictions? Please explain: \_\_\_\_\_  
\_\_\_\_\_

3. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Dietary Restrictions? Please explain: \_\_\_\_\_  
\_\_\_\_\_

4. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Dietary Restrictions? Please explain: \_\_\_\_\_  
\_\_\_\_\_

Please feel free to add more registrants as needed.

\$70/person. Cheques are payable to Community Living Access. No cancellations.  
Substitutions only.

**Please email this form to [qualityservice@communitylivingaccess.ca](mailto:qualityservice@communitylivingaccess.ca) or fax to 519-426-9549 (Attention: Cheri Emerson)**