

Elevated to Excellence

Registration form

March 27 - 28, 2009

Registration \$30.00

Please contact us for group rates

Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____

Email _____

Church _____

Would you like to donate to the scholarship fund?

\$_____ Anyone specific? _____

Mail Registration to:
Elevated to Excellence
c/o Amanda Carrasco
29-15257 99th Ave
Surrey BC V3R 7T7

604-505-3166

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