**SPRING TRAINING – REGISTRATION PLANNING**

**Please return this form to: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DELEGATE INFORMATION – Fill out below**

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|  | **First and Last Name** | **Email Address**  **(work or personal)** | **Position** | **Feb 27**  **Maintenance Day (SELECT 3 sessions)** | **Feb 28**  **Horticulture Day Session (SELECT 3)** | **Pre-Event Session**  **Feb 26** | **Post Event Session**  **Feb 28** | **Dietary Requirements** |
|  | *Example: Jane Doe* | *janedoe@gmail.com* | *Arborist* | *A1, B3, C1* | *D2, E3, F3* | *Playground* | *UBC* | *Vegetarian* |
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