



CANADIAN UNIVERSITIES QUEER SERVICES CONFERENCE 2010

REGISTRATION PACKAGE

FOR MORE INFORMATION, CONTACT US HERE:

Email: uvicpride@uvss.uvic.ca

Phone: (250) 472-4393

(250) 884-2864

UVic Pride Collective, Student Union Building
University of Victoria, P.O. Box 3035,
Victoria, B.C. V8W 3P3

or visit <http://www.cuqsc.org/>

ORGANIZATION INFORMATION:

SCHOOL:

ORGANIZATION:

ORGANIZATION PHONE NUMBER:

EMAIL ADDRESS:

ORGANIZATION MAILING ADDRESS:

STREET

SUITE NUMBER

CITY AND PROVINCE

POSTAL CODE

PERSONAL INFORMATION

FULL NAME:

AGE:

SCHOOL YOU ARE ATTENDING (IF APPLICABLE):

PHONE NUMBER:

EMAIL ADDRESS:

MAILING ADDRESS:

STREET

APT NUMBER

CITY AND PROVINCE

POSTAL CODE

DIETARY NEEDS (VEGETARIAN, VEGAN, LACTOSE INTOLERANCE, ALLERGIES (PLEASE SPECIFY))

ACCESSIBILITY (PLEASE SPECIFY ANY PHYSICAL ACCESS NEEDS)

LANGUAGE (IF YOU REQUIRE TRANSLATION SERVICES FOR FRENCH, SPANISH OR ASL, PLEASE SPECIFY HERE. WE REGRET THAT WE CANNOT OFFER TRANSLATION SERVICES IN OTHER LANGUAGES, BUT IF YOU REQUIRE ASSISTANCE WE WILL DO OUR BEST TO ASSIST YOU)

OTHER (PLEASE INDICATE HERE ANY OTHER PARTICULAR NEEDS OR CONCERNS YOU MIGHT HAVE AND WE WILL DO OUR BEST TO ACCOMMODATE YOUR CONCERNS)

Please fill in all information completely and accurately. Don't forget to include your registration fee payment of \$100.00 (Cheque or money order, made payable to: UVic Pride Collective), or a completed application for fee waiver/subsidization, when submitting your registration.

Check One:

Cheque/money order enclosed

Completed request for fee waiver/subsidy enclosed

MEDIA INFORMATION:

Please carefully read, fill out and sign the media release below. You may choose to check either box indicating your agreement/disagreement to our or others use of your image or comments in media, promotional print or website content. Delegates will not be refused attendance at the conference if they do not wish to be photographed or quoted. We require knowledge, however, of any attendees wishes not to be photographed or quoted in order to protect their privacy and ensure that should media representatives be present, those who wish to remain anonymous or maintain their privacy have their wishes respected.

MEDIA RELEASE:

I, _____, understand that the Canadian Universities Queer Services Conference may attract some media attention, and or that photos of myself or comments of mine may be used in media, promotions or on the website www.cuqsc.org or other sites. I hereby **agree** to allow any images or statements to be used in all or any of the above mentioned media.

Signature _____ Date _____

I hereby **do not agree** to allow any images or statements to be used in all or any of the above mentioned media.

Signature _____ Date _____