

READ Saskatoon
Family Literacy Training Registration Form

Training: _____

Date(s) of Training: _____

Name: _____

Organization: _____

Address: _____

Phone Work : _____ Phone Home: _____ Fax: _____

Email: _____

Please make cheque payable to **READ Saskatoon**

Receipt issued by _____

Cheque Number: _____

Please return registration form by mail to: READ Saskatoon
#304- 1114 22nd Street West
Saskatoon, SK S7M 0S5

Or fax your registration form to: (306) 652-4205

Call Desiree if you have any questions at 652-5448

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It's more than words. 