



1130, Sherbrooke Ouest, suite 1400 Montréal (Québec) H3A 2M8 Phone: 514 985-4000, poste 3006 Fax: 1 877 372-2460 (no charge)

School registration for the Bourstad 2018-2019 Program

	School Name:		
	Level of instruction :	High School	Post-secondary
	age(s) of instruction:	English	French
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	-		ead of the program
Iis roles include n	anaging participation groups	, naming group supervisors,	and creating private simulations.)
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First Name:			
Title:			
Email ^a :			
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If this form is completed on the screen, enter the name and function of the institutional representative in the area provided for the signature.

The signatory of this form certifies that he / she is authorized to transmit this registration on behalf of his / her educational institution and to submit the registration fees invoice for payment.