SIAST
SASKATCHEWAN INSTITUTE OF APPLIED SCIENCE AND TECHNOLOGY

Canadian Home Builders' Association
SASKATCHEWAN

Saskatoon & Region Home Builders' Association, Inc.

Sask WITT

SIAST & SASKATCHEWAN WOMEN IN TRADES AND TECHNOLOGY

IN PARTNERSHIP WITH

SKILLS CANADA – SASKATCHEWAN & SASKATOON & REGION HOME BUILDERS' ASSOCIATION

ARE PLEASED TO PRESENT

SKILLS WORK!

A Conference for Young Women in grade 9 & 10

THIS CONFERENCE OFFERS AN OPPORTUNITY FOR YOUNG WOMEN IN GRADES 9 & GRADE 10 FROM LOCAL SCHOOL DISTRICTS TO:

- MEET FEMALE ROLE MODELS WHO WORK IN SKILLED TRADES AND TECHNICAL OCCUPATIONS
- PARTICIPATE IN NETWORKING AND HANDS-ON ACTIVITIES

MARCH 19, 2010
REGISTRATION 8:45 AM
CONFERENCE BEGINS 9:00 AM
TERRACE ROOM
PRAIRIELAND PARK
SASKATOON, SASKATCHEWAN

CONTACT INFORMATION
KALLE NADROWSKI
PHONE: (306)955-5188 EXT. 231
EMAIL: IDCSASKATOON@CHBASASKATCHEWAN.COM

OR

CONTACT YOUR SCHOOL COUNSELOR

SKILLS WORK!

A Conference for Young Women

Registration form

Individual Information:

Name: _____

Address: _____

Phone: _____ e-mail: _____

Name of School: _____Grade: _____

School Counselor signature:_____

Please make your own arrangements with your school if you wish to attend this conference. If your teacher or Principal requires further information about this conference, we will be pleased to provide it to them. You are responsible for your own transportation to and from the conference. Lunch will be provided.

Please return completed forms by March 12, 2010 to: Kalle Nadrowski - fax: 306-373-3735 or email: idcsaskatoon@chbasaskatchewan.com. If you need further information or assistance, please call me at 306-955-5188 ext. 231.

See you there!

PARTICIPANT WAIVER FORM

I hereby agree to release SIAST, SaskWITT, Saskatoon & Region Home Builders Association and the Canadian Home Builders' Association – Saskatchewan and their project Skills Work! Young Women's Conference, from liability for any injury resulting from any cause whatsoever occurring to the named person at any time while attending the event, including travel to and from the event.

Name of participant: _____ Age: _____
Please print

Name of legal parent or guardian: _____
Please print

Signature: _____

Please provide a phone number where parent can be reached during the day: _____

IF YOU ARE 18 OR OVER, please sign for yourself. IF YOU ARE UNDER 18, we require the signature of a legal parent or guardian. THANKS

Photo Disclaimer: By signing the participant waiver form you consent to the release of any promotional photography and its release, publication, or reproduction to be used for marketing and promotional purposes.