



**OFL 2ND ABORIGINAL GATHERING
 “WALKING IN OUR MOCCASINS”
 SHERATON HAMILTON HOTEL
 116 KING STREET W. HAMILTON, ON L8P 4V3
 JUNE 2 – 4, 2010**

REGISTRATION FORM

Organization _____ Local No. _____

Address _____

City/Town _____ Postal Code _____

Telephone [Work] _____ [Home] _____

[Fax] _____ [E-mail] _____

REGISTRATION FEE \$160.00

Please print clearly. Photocopy extra forms if needed.

LAST NAME	FIRST NAME	ADDRESS	POSTAL CODE

Enclosed is a cheque in the amount of \$ _____ which covers _____ delegate(s).

Please complete and return form with cheque payable to **“OFL 2nd Aboriginal Gathering”** no later than **May 25, 2010**, addressed to Paulette Hazel OFL, 15 Gervais Drive, Suite 202, Toronto, ON M3C 1Y8 Tel: 416-443-7667, Toll Free 1-800-668-9138, Fax: 416-441-1893. If child care is required, please complete the form enclosed.