



### Sponsoring Organization

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Contact Person

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Daytime telephone #: \_\_\_\_\_ Email: \_\_\_\_\_

Course/Program Title: \_\_\_\_\_

Date: \_\_\_\_\_

Location: \_\_\_\_\_

\_\_\_\_\_

Program Agenda included:  *Please ensure that the speakers' names and credentials are included*

Amount of credit hours requested: Core: \_\_\_\_\_ Non-core: \_\_\_\_\_

(Please refer to attached guidelines for core and non-core credit)

Administration Fee if received eight weeks in advance of event: \$100.00  (Nonrefundable fee)

Administration Fee if received less than eight weeks in advance of event: \$200.00  (Nonrefundable fee)

Submit application to the Canadian Orthoptic Council at:

[administrator@orthopticscanada.org](mailto:administrator@orthopticscanada.org)

An electronic PayPal invoice for the (non-refundable) CE application fee will be sent once the application is received.

#### Office Use Only

Fee Received: \$100.00  \$200.00

Total number of credit hours awarded:

Core \_\_\_\_\_ Non-core \_\_\_\_\_

Signature of CE Chair: \_\_\_\_\_

Confirmation sent to sponsor organization:

Yes  No