



Name: _____

School: _____

City: _____ Prov: _____

Telephone: _____ WEF/WEAO Member ID: _____

E-mail: _____

Program:

Year of Study:

University Undergraduate

1st Year

4th Year

College

2nd Year

5+ Years

Post-Graduate (Master's, PhD)

3rd Year

Other: _____

I confirm that I have not previously attended the WEAO Conference

I verify my ability and commitment to attend the WEAO Annual Conference on (check all that apply):

Sunday, April 26, 2020

Monday, April 27, 2020

Tuesday, April 28, 2020

Please briefly outline why you are interested in attending the WEAO Conference:

Any questions or comments?

Signature: _____ Date: _____

Please return to yp@weaocommittee.ca by 11:59PM EST on March 15th, 2020