

CANADIAN SCHOOL OF NATURAL NUTRITION

Healthy Eating & Lifestyle Certificate Workshop Registration Form

Branch: CSNN Mississauga

Applicant's In	formation:			
Name:				
Address:				
City:	Pro	ovince:	Postal Code:	
Telephone (H):	(C):	(W):	
Email:	•			
Instructor Cris Brown, R.H.N.	Healthy Eating & Lifestyle Workshop 20 hours An online classroom series that educates you in a wide variety of nutrition basics. This course is meant to guide you through a variety of topics to understand how to eat well for yourself and your family. Classes run for a total of 20 hours, in 3 hour sessions over 7 weeks. After completion of all workshops, receive a Certificate of Attendance. For those looking to receive the Certificate of Achievement and Continuing Education Credits, students will need to complete all workshops and take 1 test (passing mark is 75%). Instructor Cris Brown is a Registered Holistic Nutritionist (RHN) that graduated from CSNN Mississauga. She is also a Culinary Nutrition Expert CNE and a Certified Food Service Manager (CFM). Read more about Cris Brown and our other faculty here. Saturday: Jan 14, 21, 28 Feb 4, 11, 25 Mar 4* 2023 9:30 a.m. – 12:30 p.m. / *9:30 a.m. – 11:30 a.m.			
PAYMENT AND ACCEPTANCE				
REGISTRATION FEE	\$25 plus HST = \$28.25	Mode of Delivery: Virtual (Mode of Delivery: Virtual Classroom Payment details: via e-transfer to mississauga@csnn.ca	
CERTIFICATE FEE:	\$280 plus HST= \$316.40	Payment details: via e-tra		
BOOKLET:	\$25 plus GST = \$26.25	TOTAL COST - \$370.90		
PLEASE READ THE FOLLOWING PRIOR TO SIGNING THIS CONTRACT:				
WITHDRAW & REFUND: If the applicant terminates registration at least 7 days prior to the workshop commencement date, registration fee will be refunded. If registration is terminated by the applicant less than 7 days before or after the workshop start date, no refunds will be granted. If CSNN cancels a workshop for any reason, all paid fees will be refunded to the applicant.				
any accident or injury or any location where This certificate will not I lifestyle.	which is caused by or arises from participat	ion of the applicant named herein, dues it certify the named applicant to co	•	
	ed for teaching purposes or shared with ar			
Signature of Ap	plicant:	Date:		