

2008 Growers' Short Course Registration
in partnership with the Pacific Agriculture Show



**50th Anniversary
Horticulture Growers'
Short Course**

February 14-16, 2008

Farm Name _____
 Address _____

 Postal Code _____
 Phone No.() _____
 E-mail address: _____

First Name	Last Name	Registration Fees		Lunch Orders Here (limited lunch tickets available at the door)			Sub-Total
		Discount prior to February 1:	Member-ship after Feb. 1:	Thurs	Fri	Sat	
1. _____	_____	<input type="checkbox"/> \$60	<input type="checkbox"/> \$80	<input type="checkbox"/> \$14	<input type="checkbox"/> \$14	<input type="checkbox"/> \$14	_____
2. _____	_____	<input type="checkbox"/> \$50	<input type="checkbox"/> \$80	<input type="checkbox"/> \$14	<input type="checkbox"/> \$14	<input type="checkbox"/> \$14	_____
3. _____	_____	<input type="checkbox"/> \$50	<input type="checkbox"/> \$80	<input type="checkbox"/> \$14	<input type="checkbox"/> \$14	<input type="checkbox"/> \$14	_____
4. _____	_____	<input type="checkbox"/> \$50	<input type="checkbox"/> \$80	<input type="checkbox"/> \$14	<input type="checkbox"/> \$14	<input type="checkbox"/> \$14	_____
5. _____	_____	<input type="checkbox"/> \$50	<input type="checkbox"/> \$80	<input type="checkbox"/> \$14	<input type="checkbox"/> \$14	<input type="checkbox"/> \$14	_____

PUBLICATIONS:

- 2007/2008 Berry Production Guide _____ @ \$30.00 = _____
- 2008/2009 (NEW) Vegetable Production Guide _____ @ \$30.00 = _____
- 2008 Proceedings (Book) _____ @ \$25.00 = _____
- 2008 Proceedings (on CD) _____ @ \$15.00 = _____

**Pay before
February 1, 2008
and save \$\$\$!**

GST included in all prices. LMHIA GST #R107646457

** All fees are in Canadian dollars

Total = _____
Is your fee enclosed?

***** New price break for additional persons from the same farm.**

Pre-registration only and payment must accompany the form.

Registration includes 3-day entry pass for Show and all Growers' Short Course sessions.

Pre-registrations are picked up at the door upon arrival.

Cheque (payable to LMHIA) *mail to: LMHIA 1767 Angus Campbell Rd Abbotsford, BC V3G 2M3*
 or **Visa** or **Mastercard** *fax to: 604-857-1570* (Illegible card numbers will **not** be processed)
 Card number: _____ Expiry Date: _____
 Name on Card (please print): _____ Signature: _____