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## Mock Exam Registration

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
Address \_\_\_\_\_ Apt # \_\_\_\_\_  
City \_\_\_\_\_ Postal Code \_\_\_\_\_  
Phone Number (\_\_\_\_) \_\_\_\_\_ E-Mail \_\_\_\_\_

### Mock Exams

Please indicate the mock exam date(s) for which you would like to register:

	<i>Mock Exam</i>	<i>Amount</i>	<i>Indicate</i>
#1	April	\$250.00	YES / NO
#2	May	\$250.00	YES / NO
#3	June	\$250.00	YES / NO
#4	September	\$250.00	YES / NO

### Payment Options:

#1. I would like to pay for all the dates I have selected in **one cheque**:  
Amount \$ \_\_\_\_\_

#2. I would like to pay with **post-date cheque(s)** for the date(s) of the mock exam(s) I will be attending:

- I have included a post-dated cheque of \$250.00 for April \_\_\_\_\_
- I have included a post-dated cheque of \$250.00 for May \_\_\_\_\_
- I have included a post-dated cheque of \$250.00 for June \_\_\_\_\_
- I have included a post-dated cheque of \$250.00 for September \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_