KADAS Solutions

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Your Learning Partner in Math & Computer Education

Authorization to Invoice

Student's Information

☐Mr ☐Mrs
☐Miss ☐Ms

Last name | Middle Name | First Name

Home Address | City/town | Province | Postal Code

Telephone | Cell | Email Address

Student ID# | Program

Courses Details

Sponsored Courses	Full Sponsorship	Limited Sponsorship
1		
2		
3		
4		
5		
6		
7		
8		
	Total	Total

Sponsor Information

Sponsoring Organization _____

Authorized Officer _____
signature | please print | position

Date ___/___/2011 Phone#_____ Fax#_____

Email_____

Authorization to invoice required from sponsor before student registers for courses

Send your completed form by

1. Fax : 1-204 - 480 - 4863
2. Email: registration@kadas.ca
3. Mail: Kadas Solutions
628 Scurfield Blvd
Winnipeg, MB R3Y IS8

Phone: 1-204-297-8971
Website: www.kadas.ca