FCJ Refugee Centre

Walking With Uprooted People

READY TOUR

Refugee hearing orientation session for agencies

Registration form

1. Full name: First Name _____ Last name_____
2. Agency you are involved:

   _____
3. Position at your agency:

   _____
4. Contact information: Phone number _____ E-mail contact:

5. Phone number :_____
6. Please explain in a few words the reason why you want to participate on the Ready Tour session for agencies: _____

   _____

Fill out the form and send it to Carolina Teves: cteves@fcjrefugeecentre.org

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