



# TEMAGAMI FIRST NATION

**BEAR ISLAND**  
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## Canoe House Collective Workshop Registration Form

Name of Workshop: \_\_\_\_\_

Name of Participant: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Cost of Workshop: \$ \_\_\_\_\_

### ***Photo/Video Release***

By signing this form, I hereby grant the Canoe House the right to use my image for the creation and distribution of photos and media posts. These will be taken for use in connection with the activities of the Canoe House for promoting, publicizing, or describing the events and work happening at and in relation to the Canoe House.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

For Office Use Only

Paid: \_\_\_\_\_ Initials: \_\_\_\_\_ Notes: \_\_\_\_\_

