

Registration Form - "Getting the Love You Want" Workshop

To pay by check: Print and complete this form and mail it with your check to the address below.

Linda and Louis McLeod
1145 Sheridan Rd., N.E.
Atlanta, GA 30324

Names _____
Address _____
City, State, Zip _____
Home Phone _____
Work Phone _____
Workshop Dates _____
Email Addresses _____
Referred by _____

A deposit of \$400 reserves a space for you. The balance must be paid in full eight days prior to the workshop. Cancellation fee: \$50.00 up to eight days before the workshop, \$100.00 within eight days of the workshop. Refunds will be processed by the day after the workshop.

Enclosed is my check # _____ for \$ _____ (deposit or full payment)

Print Name: _____

_____ Date: _____

Please Sign