



# Relax & Recharge

Hosted by Cognitive Health *Solutions*, LLC

Saturday, January 26, 2019

9:00-11:30AM

Hanover Office

\$50 per participant (groups of 2+ \$35 each)

**Registration Form Due by Thursday January 24, 2019. Spot is not reserved without completed form and payment.**

Participant Name: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Relationship to Participant: \_\_\_\_\_

Parent/Guardian Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ E-mail: \_\_\_\_\_

Payment Method : (Cash) (Check\*) (Credit Card)

Visa/MasterCard/Discover #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Amount Authorized/Enclosed: \$ \_\_\_\_\_

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

**\*Make Checks Payable to: Cognitive Health Solutions, LLC**

All payments are final; there will be no refunds issued. Cancellations received after payment is made *may* receive a credit of the same amount applicable toward a future workshop. Please note that if you register and do not attend you are liable for full payment.

Please direct all questions and registrations to:



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