



# Networking & Educational Workshop for Lymphedema Therapists July 9, 2022

## Practical Clinical Applications & Evaluation Tools for Lymphedema: PART #2

### REGISTRATION FORM

Name \_\_\_\_\_  
Occupation/Credentials \_\_\_\_\_  
Hospital/Business Affiliation \_\_\_\_\_  
BUSINESS Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
HOME Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Cell \_\_\_\_\_ Fax \_\_\_\_\_  
Email \_\_\_\_\_

*(NOTE: By giving us your email, you are subscribing to receive notifications from us.)*

**WORKSHOP FEE: \$195** (7 Contact Hours)  
**(OR: \$155 if already paid for PART #1 (5/7/22))**

\$ \_\_\_\_\_ Total Enclosed/Charged to my Credit Card  
\_\_\_\_ VISA \_\_\_\_ MasterCard \_\_\_\_ Am Ex **OR** Check Enclosed (Check # \_\_\_\_\_)  
Credit Card # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp Date \_\_\_\_/\_\_\_\_ Security Code# \_\_\_\_\_  
Signature \_\_\_\_\_

*Upon receiving your completed registration form and payment, Lymphedema Seminars will email you a confirmation and further workshop information.*

**FAX TO:** Lymphedema Seminars: 805.772.4717  
**OR MAIL TO:** Lymphedema Seminars, P.O. Box 838, Morro Bay, CA. 93443-0838  
**CONTACT:** Phone: 805.772.3560 **EMAIL:** info@lymphseminars.com  
**WEBSITE:** [www.lymphseminars.com](http://www.lymphseminars.com)