



Networking & Educational Workshop  
for Lymphedema Therapists  
**Saturday, December 7, 2024**

**Complementary Therapies on a Budget: 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 (11/2/24))**

\$\_\_\_\_\_ 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)