

WORKSHOP REGISTRATION

Return this form to:



Innovative Therapy Services
1090 Homestead Road, Santa Clara, CA 95050
EMAIL: ussom@pediatricspeech.com or FAX: (408) 241-3156

DATES: January 16th, 2015
TIME: 9:00 am to 4:00pm
LOCATION: 1090 Homestead Road,
Santa Clara, Ca 95050

There are limited spots for this class to ensure optimal hands on learning. Please enroll early

COST: \$60 Registration can be by mail, phone or fax. If mailing, please address in stamped envelope.
Do not email your credit card information. If emailing registration, call and give your credit card information.

(Registration two weeks before event date, \$65.00)

If you need accommodations please call at least two weeks prior to the event date and we will be happy to assist you.

NAME : _____

ADDRESS: _____

EMAIL: _____

PHONE: _____

DATE: _____

Cardholder name: _____

Card #: _____

Exp. Date: _____ **3 digit CVC:** _____

Signature: _____