

Seminar Registration Form

Complete & FAX to: 203-481-5364 / Questions: Mary Lyons 203-488-0028 x. 301 or mlyons@acaramedspas.com

Name: _____ Title: _____

Phone: _____ Cell: _____

Email: _____ Website: _____

Company: _____

Address: _____

How did you hear about this seminar? (circle one) **Email** **Tradeshow** **Website** **Webinar** **Other:** _____

I am registering for: **How to Market and Sell Medical Spa Services for Top-Line Success**

Monday, October 27, 2008

9:00 AM to 5:00 PM EST

(Includes cont. breakfast, lunch, coffee and a snack)

Holiday Inn Express

309 E. Main St., Branford, CT 06405

(10 miles no. of New Haven)

(877) 863-4780

To Register: Complete Form (one per person) & Fax to Mary Lyons 203-481-5364

Price: (check all that apply) \$299 for the 1st participant \$199 / additional participant

I am a Member of: The Medical Spa Society International Medical Spa Asscn

A Client or friend of:

Robard Sciton Canfield Scientific Benev

Special Price: \$239 for the first participant \$159 for each additional participant

Registration Deadline is October 20, 2008

Payment Options: Check MC VISA AMEX

Credit Card Number: _____

Total to be Charged: _____

Name on Card: _____

Signature: _____ **Date:** _____

Expiration Date: _____ **Security Code:** _____

Billing Address: _____

Cancellation Policy: Full refund upon written cancellation at least 15 full business days prior to the seminar. 50% refund upon written cancellation at least 5 days prior to the seminar. All cancellations will incur a \$25 processing fee, per person.

To pay by check: Mail Check & Form to: Acara, 500 East Main St., Suite 216, Branford, CT 06405