**PLEASE COMPLETE THE ATTACHED REGISTRATION FORM AND SEND IT TO:**

**EMAIL: carol@harrisperio.com**

**FAX: 513-336-8101**

**MAIL: 5138 CEDAR VILLAGE DRIVE**

 **MASON, OH 45040**

**REGISTRATION DUE BY: Thursday, May 2nd. If registering for additional meetings, please circle the dates you plan to attend.**

**REGISTRATION**

**NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PRACTICE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 ***(required, please. We will confirm via email.)***

**DATE(S May 9, 2019 September 19, 2019**

**October 24, 2019**

**COST: $30 each**

**PAYMENT INFORMATION: Amount $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Check Visa Master Card American Express Discover**

**Credit Card Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Expiration Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Security Code:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Billing Address (Street Number & Zip Code)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**REGISTRATION DUE: Thursday, May 2, 2019 for the May 9, 2019 meeting at The Hilton Garden Inn, Miamisburg.**