



Training Registration Form

Contact Person: _____
Agency: _____
Phone Number: _____
E-Mail address: _____
Name of Attendees: _____

- Training Title: _____
- Training Dates: _____
- Payment enclosed in the amount of: _____

Specific training needs:
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Cancellation/Refund Policy

- Cancellations must be received in writing
- All cancellations will be subject to a 50% administration fee
- Cancellations after 30 days prior to training cannot be refunded (including "no-shows")
- No refunds will be given on-site
- Substitutions are welcome with advance notice
- Mail Cancellations to: Life Works 4648 30th Street, San Diego, CA 92116

Submit Registration To:
Life Works
Attn: Beth Gallagher
4648 30th Street
San Diego, CA 92116
Phone: 619-460-5608
Fax: 619-460-5604