

CFR SEMINAR REGISTRATION FORM

NAME: _____
(As you want it to appear on our website and your CFR graduation certificate)

OFFICE NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

CELL PHONE: _____ WK PHONE: _____

E-MAIL: _____

WEBSITE: _____

DC LICENSE NO.: _____ STATE _____
(Please provide a copy of your current license)

CFR ADVANCED SEMINAR

Sept 23 - 25, 2022

09/23: 12:00PM- 6:00PM

09/24: 9:00AM- 6:00PM

09/25: 9:00AM- 12:30PM

LOCATION OF SEMINAR:

BURBANK, CA.

Hotel TBD

CFR Elite Member's

Before Sept. 1st
the cost is only \$995

After Sept. 1st
the cost is only \$1,195

After Sept 1st, REGISTRATION FEE - \$1,495

Please call for additional Information:

Phone: 818-427-1312 Fax: 818-962-3444

PAYMENT METHOD _____ VISA _____ MC _____ AMEX _____ DISCOVER

CREDIT CARD NO. _____

Exp Date: _____ 3 digit Security Code _____ Billing Zip Code _____

SIGNATURE _____ DATE _____

Return completed form to:

dr.adam@cranialfacialrelease.com

U.S. Tel: (818) 427-1312 U.S. Fax: (818) 962-3444

Thank you!

Deposits and registration fees are non-refundable, but can be applied to future seminars.