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

**EMAIL: carolkennedy2008@gmail.com**

**FAX: 513-336-8101**

**MAIL: 5138 CEDAR VILLAGE DRIVE**

 **MASON, OH 45040**

**REGISTRATION DUE BY: Friday, October 15, 2021 for the October 21st meeting. If registering for additional meetings, please circle the dates you plan to attend. Please remember that all of the meetings will be at the THE HILTON GARDEN INN, Miamisburg this year.**

**REGISTRATION**

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

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

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

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

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

**DATE(S October 21, 2021 November 18, 2021**

 **February 11,2022 March 10, 2022**

**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: Friday, October 15, 2021 (for the October 21st meeting) at the HILTON GARDEN INN, MIAMSBURG**