

## **Welcome**

Please fill this registration form out and we will get your packet to you!

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**How were you referred? Please circle one.**

Banner                      Billboard I-15                      Billboard Highland                      Expo: \_\_\_\_\_

City Weekly Lipo Light Ad                      City Weekly Wanted Ad                      Groupon

Newspaper Lipo Light Ad                      Newspaper Free Book Weight Loss Ad

Referred by: \_\_\_\_\_ Other: \_\_\_\_\_

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