

**Wellness in the Workplace: Stress and Burnout Prevention- September 24 - 26, 2019 - Lihue, HI**

First Name:		Last Name:	
Address:		City:	State: Zip:
Job Title:		Employer:	
Phone:	Fax:	Email:	
Tribal Affiliation:			

**Registration Fee: \$395**

Includes training sessions, wellness activities, and training materials.

Purchase orders accepted. Please visit our website to register and pay online.

**Please register me for the Wellness in the Workplace - Stress and Burnout Prevention Training:**

- Enclosed is a check, money order or purchase order for \$395.
- Please bill me (fill out billing information below)

<b>Name:</b>			
<b>Email Address:</b>			
<b>Billing Address:</b>	<b>City:</b>	<b>State:</b>	<b>Zip:</b>

- I will pay \$395 by Visa or Mastercard (circle one)

**If paying by credit card, please fill out the following information:**

<b>Name:</b>	<b>Phone:</b>		
<b>Billing Address:</b>	<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Credit Card Number:</b>		<b>Expiration:</b>	
<b>Security Code:</b>	<b>Signature:</b>		
<b>Email:</b>			

**3 Easy Ways to Register:**

- **By fax**  
360-877-4051
- **By mail (note new address)**  
112 E. Pinedirosa Rd.  
Union, WA 98592
- **Online at [www.NativeWellness.com](http://www.NativeWellness.com)**

**Please mail payments to:  
Native Wellness Institute  
112 E. Pinedirosa Rd.  
Union, WA 98592**



**If registering by fax, please include copy of check or purchase order.**

**For more information:**

Shannon Kissinger  
Project Director  
Call or Text: 503-457-6520  
[info@nativewellness.com](mailto:info@nativewellness.com)

**Cancellation / No-show Policy:**

Registrants who are unable to attend may send a replacement participant at no additional charge. Please provide us with the name of the replacement before the training. If a participant is unable to attend and no cancellation is made prior to the training or replacement is made, the **FULL** amount of registration will be charged as a no-show fee.

**Photo and Video**

By registering I grant to the Native Wellness Institute, its representatives and employees the right to take photographs and/or video of me and my property in connection with the above-identified subject. I authorize the Native Wellness Institute, its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that the Native Wellness Institute may use such image(s) of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and web content.