



CONTRACT OF ENROLLMENT
Healthy-Lifestyle Continuing Education
for Grown-Ups
Spring 2010

Please Print

Date ___/___/___

Name _____

Address _____ City _____ State _____ Zip _____

Home Phone (____) _____ Cell Phone (____) _____

Fax (____) _____ Email: _____

If child is in a HealthBarn USA program, please name: _____

Please explain any medical conditions (including allergies or other dietary needs) _____

Physician: _____

How did you **first** learn about us? _____

Are you enrolling for the 6-Week 12-Week beginning April 5, 2010

Please indicate preferred series for you:

- | | |
|---------------------------------|---------------------------------|
| ___ Series A Tuesdays 1:00 pm | ___ Series B Wednesdays 9:15 am |
| ___ Series C Wednesdays 1:00 pm | ___ Series C Fridays 9:15 am |
| ___ Series D Saturdays 9:00 am | |

Additional requests will be considered: _____

Program Package:

6-week HB USA includes: **Early bird special through 3/15/10 is \$288.00**

Fee:
\$320.00*

- Private consultation by nutritionist.
- 6 hours of in-depth nutrition education and recipe tasting.
- Field trip to local supermarket
- HB USA Recipe Book, class binder, supplies, natural and organic food included.

12-week package includes: **Early bird special through 3/15/10 is \$445.00**

\$495.00*

- Initial and final private consultation by nutritionist.
- 12 hours of in-depth nutrition education and recipe tasting.
- Field trip to local supermarket
- HB USA Recipe Book, class binder, supplies, natural and organic food included.

* 10% discount for adult with a child in a HealthBarn USA program.

- ✓ To enroll send a deposit of \$50.00 with this agreement to HealthBarn USA, Inc., PO Box 621, Wyckoff, NJ 07481. Please inquire about a payment plan or full payment will be due at the start of the program.
- ✓ Fee may be partially reimbursed by your health insurer, or covered by Flexible Savings Account.

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