

Registration Application

Instructions:

Step 1: Complete the information below and submit

Via fax to: 214-902-3452

**Step 2: Then, send a check, cashier's check or money order
made payable to Special Advisory Services, Inc to:**

**SAS, Inc.
4131 Herschel Ave.
Dallas, TX. 75219**

Check Date You Will Be Attending:

- Wed & Thurs March 28, 29th
- Wed & Thurs May 9, 10th
- Wed & Thurs August 29,30th
- Wed & Thurs October 10, 11th

Personal Information:

Name _____
Address _____
City _____ State _____ Zip Code _____
Phone # (home) _____
Phone # (work) _____
Phone # (cell) _____
Fax # _____
E-mail address _____
Employer _____

Credit Card Information:

Name as it appears on your credit card: _____

Which card will you be using?

VISA account # _____ Exp date _____
 MasterCard # _____ Exp date _____
 AmerExpress# _____ Exp date _____

For additional information or any questions, contact:

Nancy MacDonald, D.C. at 972-415-4740 (cell)