MUSCULAR WELLNESS INSTITUTE
553 Rt 3A, Bow NH 03304

Seminar/ Workshop Registration Form

Name:_____

Professional Lic. #: _____ State: ___

Address:_____

City:_____State: _____Zip: _____

Phone #:(H)_____ Cell.#:_____ Email:_____

How did you find out about the course:_____

Course Name:_____ Dates: _____
Amount of course: _____ Deposit _____

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Amount: of course: _____ Deposit _____

**Minimum deposit required to hold your space is $100 (UNLESS NOTED OTHERWISE). Deposits are refundable (see credit card) up to two weeks prior to the start date of the program and transferable if cancellation is less than two weeks prior to the start date, a $25 admin fee will be deducted for all transferred deposits. All transferred deposits must be applied to another program within a year. Refunded deposits made via credit card are deducted 3% due to operating costs. If MWI has to cancel a program for any reason, deposits are refundable in full.

Send in your check with this registration form made payable to:
Muscular Wellness Institute
553 Rt 3A
Bow, NH 03304

We also accept Visa & MasterCard.
Credit Card #:__/__/__/__/__/__/__/__/__/__/__/__/__/__/__/__/ Exp: ___/___
CVVV2 # ____ (3 digit # on the back of the credit card)
Zipcode: _____
Cardholder Name:_____Signature:_____

To contact MWI:
(603) 228-7711 www.MuscularWellnessInstitute.com