

Wellness Counseling Associates LLC
Richard Wheeler, LPC
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REGISTRATION FORM

DOMESTIC VIOLENCE PROGRAM

NAME: [Print] _____ Email: _____

ADDRESS: _____ ZIP: _____ Tel: _____

PROBATION OFFICER: _____ Email: _____

ATTORNEY: _____ Email _____

CLASS TUITION \$100 [LUNCH PROVIDED: PIZZA]

NEXT CLASS DATE (ALL CLASSES ARE 2 DAYS)

_____ SEPTEMBER 26 & 27	8:30 AM – 3:00 PM
_____ OCTOBER 24 & 25	8:30 AM – 3:00 PM
_____ NOVEMBER 14 & 15	8:30 AM – 3:00 PM
_____ DECEMBER 12 & 13	8:30 AM – 3:00 PM

***ADDITIONAL PROGRAM INFORMATION:** Please visit the Wellness Counseling Associates LLC, Website: RWWCA.COM*

CLASS LOCATION: **WELLNESS COUNSELING ASSOCIATES, LLC**
439 NORTH DUKE STREET,
LANCASTER. PA 17602

MAIL REGISTRATION FORM TO: (With check or money order)

Wellness Counseling Associates LLC
P.O Box 6356
Lancaster, PA 17607

PLEASE SIGN

DATE