

Registration Form for LMHC Prep Course

**BLH Psych Services, LLC
PO Box 741084
Boynton Beach, FL 33474**

Name: _____

Address: _____

Phone #: _____

Email Address: _____

Registration Fee: \$150

****We are accepting payment via check or money order to the above address. For Zelle payment please pay using the email address lmhcrepcourse@gmail.com**

Please check date you will be attending: All courses will be held via Zoom Webinar

_____ May 21st, 2022

Cancellation Policy:

You must cancel at least 5 days in advance to receive a full refund. If you cancel after 5 days prior to the course you will be charged \$40. If cancellations are made on the scheduled day of the course no refund will be given. There will be a \$25 charge on all returned checks.

Note: *One week prior to the course you will be mailed the comprehensive study material and Zoom Registration Link for the Webinar.*

Disclaimer:

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I agree to all the terms and conditions for this course by signing below:

X _____
Signature

Date: _____