

**Samaritan Safe Church - Circle of Hope  
Fall 2017 Registration**

Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Physical restrictions? No  Yes  explain \_\_\_\_\_

Any other concerns you would like us to know about?

\_\_\_\_\_  
\_\_\_\_\_

**All sessions are on Thursday from 7:00 – 8:30 p.m.  
At Samaritan Counseling Center 1803 Oregon Pike, Lancaster**

Meeting dates are September 14<sup>th</sup> & 28<sup>th</sup>, October 5<sup>th</sup> & 26<sup>th</sup>, November 16<sup>th</sup> & 30<sup>th</sup>.

The cost for the Circle (6 sessions) is \$125. Some scholarship funds are available. Payment in full is expected at registration. To pay by check or credit card mail this registration form to Samaritan Counseling Center, Attn: Deb Helt, 1803 Oregon Pike, Lancaster, PA 17601. If you prefer to register by phone, contact Deb at 717-560-9969 Ext 273.

Credit Card

Name on Card \_\_\_\_\_

Billing Address for the Card \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Type: Visa/MC/Discover (circle one)

Exp. Date \_\_\_\_\_ CVV Number (back of card) \_\_\_\_\_

Total to be Charged \$ \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_