

PLEASE TELL US HOW YOU HEARD ABOUT THIS EVENT: (Please check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Word of Mouth (from a friend, coworker, etc.) | <input type="checkbox"/> Web Site Notice [LIST WEB SITE: _____] |
| <input type="checkbox"/> Posted Flyer [LIST LOCATION: _____] | <input type="checkbox"/> Newspaper Posting [LIST PAPER: _____] |
| <input type="checkbox"/> Flyer Hand-Out [WHERE DISTRIBUTED: _____] | <input type="checkbox"/> Radio / TV [LIST STATION: _____] |
| <input type="checkbox"/> E-Mail Notice [WHO SENT IT TO YOU? _____] | <input type="checkbox"/> LIST YOUR ORGANIZATION Postal Mailing |
| <input type="checkbox"/> Article [LIST PUBLICATION: _____] | <input type="checkbox"/> LIST YOUR ORGANIZATION E-Newsletter |

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