



Southern California Association of Activity Professionals

SCAAP Lunch and Learn Sessions

Registration Form

Name: _____ Title: _____

Name of Facility/ Business/ Work: _____

Address: _____

Phone: _____ Email: _____

Sessions You Will be Participating In (All Sessions will be on Zoom from 12:30pm-1:30pm)

Thursday, June 23rd-12:30pm-1:30pm

Topic: Avoiding Sensory Deprivation

Speaker: Bonnie Jacobs, CTRS

Lunch and Learn Registration Fees

Current Members _____ **FREE**

New/Renewing Members: Join SCAAP and all Lunch and Learn

Session Fees are Waived _____ **\$60.00**

TOTAL PAYMENT _____

Payment Options

Make check payable to SCAAP

Mail Registration & Payment to: Loren Apodaca, SCAAP Treasurer
West Anaheim Extended Care Hospital
645 S. Beach Blvd. Anaheim, CA 92804
Phone: (714) 821-1993

Credit Card Payment (Visa, Master Card, Discover, American Express)

Name: _____ Billing Address: _____

State _____ Zip Code _____ Card # _____

Exp. Date: _____

CVC: _____

Or Visit SCAAP.net to register and pay w/ PayPal

Email registration to: Andrea Richardson, SCAAP Director of Membership

Email: Andrea.Richardson@Humangood.org

For Information visit:

<http://www.scaap.net>