

# 2022 HCG DIET COUNCIL ONLINE TRAINING REGISTRATION FORM

Complete page 1. Then on page 2, choose a date, register attendees, submit both pages and credentials.

**ANNUAL MEMBERSHIP** \_\_\_\_\_ \$395 Corporate Member & frameable document. Annual auto renewals only \$79 year + S/H  
\_\_\_\_\_ \$225 Professional Member & frameable document. Annual auto renewals only \$49 year + S/H

**TRAINING** \_\_\_\_\_ ~~\$1499 VALUE~~ / \$799 Non-Member Training Fee / includes color training manual + S/H  
\_\_\_\_\_ ~~\$1499 VALUE~~ / \$499 per person training fee if join as a Corporate Member (save 66%)  
(training of up to 3 people at reduced fee of \$499 per person) / includes color training manuals + S/H  
\_\_\_\_\_ ~~\$1499 VALUE~~ / \$499 training fee if join as a Professional Individual Member (save 66%)  
(training of 1 Professional at the reduced fee of \$499) / includes color training manual + S/H

**CERTIFICATION** \_\_\_\_\_ \$100 exam / grading / processing PER PERSON and frameable Certification document included  
(pre-requisite: HCG Diet Council Training)

**HCG DIETER FORMS\*** \_\_\_\_\_ \$199 Comprehensive compilation of 13 in-office dieter/patient printable forms in a zip file.  
Includes patient handouts, dieter forms/patient file, consent form, FDA disclaimer, diet and dieter directions, recipes and more.  
**\*INCLUDES: FREE ADDITIONAL 1 HOUR TRAINING EXPLAINING HOW TO USE ALL FORMS**

\_\_\_\_\_ \$775 In-office dieter / patient forms only. No training.

Business name \_\_\_\_\_ Owner \_\_\_\_\_ Title \_\_\_\_\_

Business address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

**(Training materials only ship to your business address listed above)**

Website: www. \_\_\_\_\_

I offer the HCG Diet \_\_\_\_\_ Y \_\_\_\_\_ N If so, how long \_\_\_\_\_ If so, what form \_\_\_\_\_

**Name on credit card (all info must match exactly)** \_\_\_\_\_

Credit card billing address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Card Type: MC Visa Discover # \_\_\_\_\_ Security code \_\_\_\_\_  
**(we cannot accept AMEX)**

Expiration Date \_\_\_\_\_ / \_\_\_\_\_ Total of charges from above \$ \_\_\_\_\_ (does not include S/H)

Authorization Signature \_\_\_\_\_

S/H (OFFICE USE ONLY) \$ \_\_\_\_\_ Grand Total (OFFICE USE ONLY) \$ \_\_\_\_\_

**CHARGES AND RENEWALS ON YOUR CREDIT CARD WILL APPEAR FROM: WEIGHT LOSS PRODUCTS, LLC - our management company Effective 2/1/22**

Choose a 2022 training date, COMPLETE page 1 and page 2 and fax both pages **along with each participant's credentials**  
 to: 1-727-245-6905 (include '1' in the fax number)  
 (or) scan and email to: thecouncil@hcgdietcouncil.org

Choose a training	2022 training date / Saturday	Registration deadline by 5pm EST
	February 19	Friday February 11
	March 19	Friday March 11
	April 23	Friday April 15
	May 21	Friday May 13
	June 18	Friday June 10
	July 16	Friday July 8
	August 13	Friday August 5
	September 17	Friday September 9
	October 15	Friday October 7
	November 12	Friday November 4
	December 10	Friday December 2

Business name \_\_\_\_\_

**\*A copy of each participant's credentials must be submitted to process this registration**

Please list Professional(s) name and credentials EXACTLY as should be listed on certificates

➤ 1<sup>st</sup> attendee name \_\_\_\_\_ Credentials\* \_\_\_\_\_

Attendee's e-mail address \_\_\_\_\_ Phone \_\_\_\_\_

➤ 2<sup>nd</sup> attendee name \_\_\_\_\_ Credentials\* \_\_\_\_\_

Attendee's e-mail address \_\_\_\_\_ Phone \_\_\_\_\_

➤ 3<sup>rd</sup> attendee name \_\_\_\_\_ Credentials\* \_\_\_\_\_

Attendee's e-mail address \_\_\_\_\_ Phone \_\_\_\_\_

By signing below, you acknowledge that information from The HCG Diet Council is published in good faith and for informational purposes only. The HCG Diet Council and its associates and/or affiliates do not make warranties about the completeness, reliability, or accuracy of the information. By becoming a member, participating in the training and/or certification program, or paying for your associates to participate, you understand and agree that any action you or your associates take upon information provided is strictly at your risk and The HCG Diet Council and its associates and/or affiliates are not and will not be liable for any losses and/or damages in connection with information provided nor do they provide business training or advice. You also understand that Certification of attending and/or passing training courses offered by The HCG Diet Council are not a substitution for licensure of any kind in any location nor an endorsement of yours or your associates' competency.

Owner's name \_\_\_\_\_ Credentials \_\_\_\_\_ Date \_\_\_\_\_

Owner signature \_\_\_\_\_ and I certify that attendees are associates of my business.

**Charges on your credit card will appear from: WEIGHT LOSS PRODUCTS, LLC – The Council's management company**