## Pre-Attendance Package

**

***Contains Important, Time Sensitive Information***

***Please complete and return at least 10 days prior to program event.***

Dear Choices Participant,

Someone who loves and cares about you very much has invited you to attend **Choices Program Inc.** a life success program. I would like to congratulate you for making the life-changing decision to join us for the **Choices Program LLC**. Upon completion of this program, you will belong to a group of people from across the country that are truly connected and understands that we are all in this world together. A website has been developed to provide continuous communication and education to help you in your daily lives. We hope that you will continue to enjoy the benefits of **Choices Program LLC.**  long into the future. I believe that your attendance is not a coincidence. Your desire to master your life and to create enormous possibilities for yourself has led you to us. The learning process that you are about to embark on is about personal discovery and will give you insight into your business, relationships and money matters. The **Choices Program** begun the moment you made the decision to attend. Your next step is to read, complete and return the attached Pre-Attendance Package **(pages 6 and 7) via fax or by mail.**

**Choices Program Inc.**

##### 75 Elm Wood Drive

##### Smyrna, Delaware 19977

Phone:

Fax:

Contact Person:

Direct: xxx-xxx-xxxx Email: xxxx@yourlifeyourchoices.com

Please be sure to answer all of the questions accurately. In preparation for the upcoming program it is a good idea to reflect on those things that you would like to change or improve in your life. Think about what you specifically intend to accomplish in a realistic timeframe. Focus on your highest priority and begin to get organized. While we can’t guarantee that **Choices Program LLC.** will answer all your questions, we can promise that it will help you develop more clarity, focus, and the ability to make more consistent decisions in your life. We congratulate you on sharing this part of your journey of discovery with us and we look forward to meeting you personally!

Sincerely,

Nathaniel X. Ross

**Important Choices Program LLC. Information**

This package contains important logistical information regarding the program, venue, hours and other details that you will need in order to make your experience more effective, lasting and enjoyable.

**Program Date:**

**Venue Location:** Sandy Cove Ministries  
60 Sandy Cove Road  
North East, MD 21901

E-mail: [info@sandycove.org](mailto:info@sandycove.org)

Toll Free: (800) 234-2683  
Local Phone: (410) 287-5433  
Fax: (410) 287-3196

**Program Rate:**  **$950.00 -**The program fee includes the 3 day program, 3 day housing accommodations, all day meals and refreshments and class materials.

Note: Please be aware if you choose to have your own room there will be a rate increase.

**Parking:** Plenty of parking is available. All cars should remain in parking area except for unloading

**Meals/Refreshments:** All meals will be provided. We will have frequent breaks, with refreshments. Feel free to bring your own goodies.

**Things to Bring With You to the Program**:

* A warm sweater or jacket. Everyone’s body temperatures vary.
* Business cards to network with other participants. All program materials are provided.
* Cash (There will be times that we will ask you to put your money where your mouth is)

##### Choices Program Inc. Time Schedule

## Friday 12:00 pm Room Check in

## 2:00 pm Class Begins

11:00 pm Class Ends (approx.)

## Saturday 9:00 am Class Begins

11:00 pm Class Ends (approx.)

## Sunday 9:00 am Class Begins

2:30 pm Class Ends (approx.)

***Please do not schedule any appointments or telephone calls/conferences during this program. We want everyone physically and mentally present. This is a course that encourages networking and participation with others in the program. This will accelerate your ability to get better results!***

**As part of our commitment to excellence and to being the best that we can be, we have found it beneficial to make it clear up-front what you can expect from us, and, what we expect from you in return.**

**We Commit To:**

1. Deliver the latest breakthrough education technology in an environment that is fun, stimulating, and never boring.
2. Provide instructors who are charismatic, powerful communicators.
3. Charge reasonable prices in exchange for excellent value.
4. To providing a safe space for learning.
5. To provide ongoing interactive community
6. Be open to any suggestions for improvement.

**You Commit To:**

1. Always participate 100%. Allow yourself to be vulnerable
2. Arrive on time and stay for the entire session, leaving the room only when necessary.
3. Apply what you learn.
4. If you find value, refer family and friends that are ready for this part of the journey in life
5. Providing us feedback.
6. Keep any commitments that you make

Print Name:

Age:\_\_\_\_\_\_\_\_\_\_\_\_ Birth date: (Month/Day/Year) / / Male / Female

Single / Married / Widowed /Separated / Divorced

Business (street) (city/state/zip)

Home (street) (city/state/zip)

Bus Phone: ( ) \_\_Fax: ( ) \_ \_\_\_\_\_ \_\_\_\_\_\_Mobile Phone: ( )

Res. Phone: ( ) E-mail

##### Personal Discovery

*(All Information Provided Remains Completely Confidential)*

**EDUCATIONAL EXPERIENCE**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PROFESSIONAL EXPERIENCE**: Briefly describe your recent experiences and areas of responsibility. Are you in a leadership role? What do you consider to be your major career accomplishments? Be specific.

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PROFESSIONAL ORGANIZATIONS: Are you a member of professional organization(s)? What is your role within the organization(s)?

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**PERSONAL EXPERIENCE**: List any special interest, growth or personal activities, which you are now or have been involved in the past. (Self-awareness programs, meditation, physical activities, hobbies, etc.)

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**PURPOSE**: Clearly state your purpose and the specific results you intend to gain from participating in this program and briefly state the area of business in which you intend to make a contribution.

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**GOALS AND OBJECTIVES**: List your business and personal goals for three months, six months and one year from day 1 of program.

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**Consent Agreement:**

Yes, I understand that the **Choices Program LLC.** may be audio and/or videotaped. I consent to and authorize you to use my name, voice, appearance, image, words and participation in whole or in part in these recordings and any future correspondence or other derivative materials based on them, and I understand that you intend to use them for educational, promotional and commercial applications.

I understand that you do not have any obligation whatsoever to use all or any part of my participation in the program and you may edit any audio or visual recording of my participation at your discretion. You shall have the right to reproduce, advertise, and publicize my participation in these materials without compensation to me. I agree that you shall own all rights, title and interest, including copyright, in and to the originals and all copies of such audio, visual or written recording.

This release shall be governed in accordance with applicable laws; it may be amended only in writing, and constitutes the entire Agreement of the parties with respect to its subject matter. In the event of litigation, the prevailing party shall be entitled to recover its costs and attorney's fees.

**Confidentiality Agreement:**

I understand that **Choices Program LLC.**  is a private experience for every participant. I agree that all remarks and actions of participants are confidential and will not be used against the participants during or after class.

**Declaration and Promise:**

I declare that all my responses are accurate and true to my best knowledge. I agree to abide by the Confidentiality Agreement.

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Participant's Signature Date of Acknowledgement