## **Coaching Response Card**

Please schedule me for:  ☐ Six Month Coaching Engagement (\$ 12,500) ☐ Three Month Coaching Engagement (\$ 7,250) ☐ Leadership Development Planning (\$ 2,500)
I would like to work with (check one):  ☐ Ted Carroll ☐ Doe Hentschel ☐ Thomas Matthews ☐ Scott Serviss ☐ Valerie Taylor
METHOD OF PAYMENT (please choose one)  My check is enclosed in the amount of \$  Invoice my organization in the amount of:  \$(P.O. #)  Charge my credit card for the coaching fee.
(We will contact you to arrange payment.)  Name:
Title: Company/Division: Company Address:
City:         Zip:           Work Location (if different):         Discrete the continuous properties of
Telephone:

## Complete this form and return it to:

Solutions EAP c/o ABH 213 Court Street Middletown, CT 06457

Fax: