



Holistic Health Care & Consultation LLC.

"Personalized Care for Optimal Health & Wellness"

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Derek Senior, N.D.
Dorette Lewis-Senior, N.D.
Naturopathic Physicians

Dear _____:

Thank you for giving me the opportunity to discuss **Corporate Wellness** with you. Based upon our conversation regarding your event, I would like to move forward with planning for your event in a timely manner. Below is a summary of services with applicable fees.

To the entities of Corporate wellness as follows*

Corporate Wellness Services	Fees
1 Hour In-service	\$250.00
All day Workshop	\$2,000-\$3,000
Seminars	\$250.00/Hr.
Employee Physicals (negotiable)	\$100.00 per Employee
Wellness Fairs & Events (negotiable)	\$250.00-\$3,500.00
Interior Design	Customized to fit company's budget.

*Cost may vary in each state. Terms and conditions subject to change without notice.

You have agreed to utilize my services for _____. The cost to you is _\$_____ of which _____ is the required deposit for reservation of time and preparation of materials. Your deposit is non-refundable. Any cancellation of services after full-payment is made requires 72-hour notice and a 2-week period for a partial refund.

Thank you for choosing Holistic Healthcare and Consultation. We look forward to serving you.

Sincerely,

Dr. Lewis-Senior
Chief Executive Officer

Agreement accepted by

Name _____
Company & Title _____

Date: _____