



HEALTH FAIR INFORMATION

REQUEST INFO TODAY!

WE PROVIDE:

FREE IN BODY ANALYSIS ASSESSMENTS

GIVEAWAYS / RAFFLES

MEAL GUIDANCE

SUPPLEMENT SAMPLES

COMPLIMENTARY CLASS PASSES FOR 1 WEEK



INCLUDE IN EMAIL:

BUSINESS NAME

ADDRESS

EVENT TIME / DATE

OF EVENT ATENDEES



MAIL IN HEALTH FAIR REQUEST FORM

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

EVENT TIME: _____ EVENT DATE: _____

REPRESENTATIVE NAME: _____ PHONE: _____

EMAIL: _____ WEBSITE: _____

DEMOGRAPHICS: _____ EXPECTED ATENDEES: _____



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CITY OF INDUSTRY CA 91744
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DUARTE CA 91010
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