

# Please Count Me In!

I, \_\_\_\_\_ commit myself to the betterment of my overall health & wellness. I will engage in behaviors that will assist me in "Beating the Odds & Claiming Wellness" for me and my loved ones.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Organization: (if applicable) \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone #: \_\_\_\_\_



Please Write Your Return Address Below:

---

---

---

Sister to Sister International, Inc.  
P.O. Box 351  
Yonkers, NY 10703-0021  
Attn: STBO Campaign