

HAHA Conference Registration Form

October 10, 2025 8:30 AM- 4:30 PM

OLV Elementary School

2760 South Park Ave.

Lackawanna, NY 14218

Name: _____

Address: _____

Phone: _____ Email: _____

Agency (if applicable) : _____

Agency Contact Person : _____

Phone Number: _____

Peer \$15 _____ Non-Peer \$25 _____

Cost includes morning snack, water or juice, lunch and workshops. Partial scholarship available. You can apply for the scholarship but they are limited. Doors open at 8:15

***Registration must be received by Sept. 19, 2025 Payment is due within one week of submitting registration. Forms can be mailed to Jill O'Hara, 5065 Clarice Drive, Hamburg, NY 14075
Or email : healthyalternativeshaha@gmail.com***

Registration forms available on the website: www.healthyalternativesthruhealingarts.com

Partial Scholarship Application

We do not provide transportation to the conference. Scholarships are limited , therefore we must receive your request by Sept. 5, 2025

Name: _____

Address: _____

Phone: _____ Email: _____

Submit this form with your registration. Payment if you receive the scholarship will be due June 3, 2024.

Make Checks payable to Healthy Alternatives through Healing Arts

Call or text Jill O'Hara with questions. 716-426-6529

