

## CONFIRMATION EMAIL TO STUDENTS

## CONFIRMATION EMAIL TO TRAINING CENTER

**From:** registrations@lessstress.com  
**Date:** Friday, May 22, 2009 2:31 PM  
**To:** jmateus@lessstress.com  
**Subject:** Registration

**From:** registrations@lessstress.com  
**Date:** Friday, May 22, 2009 2:31 PM  
**To:** registrations@lessstress.com  
**Subject:** [Office] Course confirmation email.

### Course Enrollment successful.

On Friday, May 22, 2009 you have been registered for CPR For Healthcare Providers

#### Event Schedule:

Session: 01 - Timing: Tuesday, May 26, 2009 6:00 PM - 10:30 PM

**Event Cost:** \$80.00

#### Location:

Health & Safety Training Center at On Time  
111 East Highland Parkway  
Roselle, NJ 07203

**Confirmation Number:** 939568

First Name: John  
Last Name: Mateus  
Your E-Mail Address: jmateus@lessstress.com  
Your Phone Number: 973-427-9692  
Your Address: 111 East Highland Parkway  
Your City: Roselle  
Your State: NJ  
Your Zip: 07203  
Payment Method: Visa/Mastercard  
Card Number: 4154 XXXX XXXX 1558

#### Note:

On Friday, May 22, 2009 the following person has been registered for CPR For Health

#### Event Schedule:

Session: 01 - Timing: Tuesday, May 26, 2009 6:00 PM - 10:30 PM

**Event Cost:** \$80.00

#### Location:

Health & Safety Training Center at On Time  
111 East Highland Parkway  
Roselle, NJ 07203

**Confirmation Number:** 939568

#### Student Information

First Name: John  
Last Name: Mateus  
E-Mail Address: jmateus@lessstress.com  
Phone Number: 973-427-9692  
Address: 111 East Highland Parkway  
City: Roselle  
State: NJ  
Zip: 07203  
Payment Method: Visa/Mastercard  
Card Number: 4154 XXXX XXXX 1558

#### Note: