

**My Feedback on the 'Focus on Breathing' Seminar**  
at East Greenbush Community Library on Thursday 5/4/11

1. The seminar was                      **Excellent**      **Very Good**      **Good**      **Not useful**

2. I will use this technique to relieve my (concern) ..... *SLEEPING PROBLEM* .....

3. Comments/ Suggestions about the class (if any) ..... *RELAXING* .....

(Optional) Name: ..... Ph# .....

E-Mail (print); ..... (To receive ANNUAL UPDATE on this technique)

**My Feedback on the 'Focus on Breathing' Seminar**  
at East Greenbush Community Library on Thursday 5/4/11

1. The seminar was                      **Excellent**      **Very Good**      **Good**      **Not useful**

2. I will use this technique to relieve my (concern) ..... *HYPERTENSION* .....

3. Comments/ Suggestions about the class (if any) .....

(Optional) Name ..... Ph# .....

E-Mail (print); ..... (To receive ANNUAL UPDATE on this technique)

**My Feedback on the 'Focus on Breathing' Seminar**  
at East Greenbush Community Library on Thursday 5/4/11

1. The seminar was                      **Excellent**      **Very Good**      **Good**      **Not useful**

2. I will use this technique to relieve my (concern) ..... *stress, anxiety, sleeplessness* .....

3. Comments/ Suggestions about the class (if any) .....

(Optional) Name ..... Ph# .....

E-Mail (print); ..... (To receive ANNUAL UPDATE on this technique)

**My Feedback on the 'Focus on Breathing' Seminar**  
at East Greenbush Community Library on Thursday 5/4/11

1. The seminar was                      **Excellent**      **Very Good**      **Good**      **Not useful**

2. I will use this technique to relieve my (concern) *stress & insomnia* .....

3. Comments/ Suggestions about the class (if any) *I really like it* .....

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**My Feedback on the 'Focus on Breathing' Seminar**  
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1. The seminar was                      **Excellent**      **Very Good**      **Good**      **Not useful**

2. I will use this technique to relieve my (concern) *stress* .....

3. Comments/ Suggestions about the class (if any) *Would like to take another class* .....

(Optional) Name: ..... Ph# .....

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**My Feedback on the 'Focus on Breathing' Seminar**  
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1. The seminar was                      **Excellent**      **Very Good**      **Good**      **Not useful**

2. I will use this technique to relieve my (concern) *to keep me patient* .....

3. Comments/ Suggestions about the class (if any) *You did a super job in explaining the techniques* .....

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1. The seminar was                      Excellent      Very Good      Good      Not useful

2. I will use this technique to relieve my (concern) ..... stress .....

3. Comments/ Suggestions about the class (if any) very good .....

(Optional) Name: ..... Ph# .....

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**My Feedback on the 'Focus on Breathing' Seminar**  
at East Greenbush Community Library on Thursday 5/4/11

1. The seminar was                      Excellent      Very Good      Good      Not useful

2. I will use this technique to relieve my (concern) ..... Tension, Stress, Anxiety, Road Rage .....

3. Comments/ Suggestions about the class (if any) ..... GREAT! Please come again. .....

(Optional) Name: ..... Ph# .....

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**My Feedback on the 'Focus on Breathing' Seminar**  
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1. The seminar was                      Relaxing Excellent      Very Good      Good      Not useful

2. I will use this technique to relieve my (concern) ..... Insomnia .....

3. Comments/ Suggestions about the class (if any) .....

(Optional) Name: ..... Ph# .....

E-Mail (print); ..... (To receive ANNUAL UPDATE on this technique)

**My Feedback on the 'Focus on Breathing' Seminar**  
at East Greenbush Community Library on Thursday 5/4/11

1. The seminar was Excellent Very Good Good Not useful

2. I will use this technique to relieve my (concern) sleeping; anxiety

3. Comments/ Suggestions about the class (if any) .....

(Optional) Name: ..... Ph# .....

E-Mail (print); . .... (To receive ANNUAL UPDATE on this technique)

**My Feedback on the 'Focus on Breathing' Seminar**  
at East Greenbush Community Library on Thursday 5/4/11

1. The seminar was Excellent Very Good Good Not useful

2. I will use this technique to relieve my (concern) STRESS

3. Comments/ Suggestions about the class (if any) .....

(Optional) Name: ..... Ph# .....

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**My Feedback on the 'Focus on Breathing' Seminar**  
at East Greenbush Community Library on Thursday 5/4/11

1. The seminar was Excellent Very Good Good Not useful

2. I will use this technique to relieve my (concern) Anxiety, stress

3. Comments/ Suggestions about the class (if any) Very informative

and effective!

(Optional) Name: ..... Ph# .....

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**My Feedback on the 'Focus on Breathing' Seminar**  
at East Greenbush Community Library on Thursday 5/4/11

1. The seminar was Excellent Very Good Good Not useful

2. I will use this technique to relieve my (concern) stress, insomnia

3. Comments/ Suggestions about the class (if any) Thank you! very helpful

(Optional) Name: ..... Ph# .....

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**My Feedback on the 'Focus on Breathing' Seminar**  
at East Greenbush Community Library on Thursday 5/4/11

1. The seminar was Excellent Very Good Good Not useful

2. I will use this technique to relieve my (concern) Stress, Heart disease

3. Comments/ Suggestions about the class (if any) .....

(Optional) Name: : ..... Ph# .....

E-Mail (print); . (To receive ANNUAL UPDATE on this technique)

**My Feedback on the 'Focus on Breathing' Seminar**  
at East Greenbush Community Library on Thursday 5/4/11

1. The seminar was Relax Excellent Very Good Good Not useful

2. I will use this technique to relieve my (concern) stress, steepig

3. Comments/ Suggestions about the class (if any) .....

(Optional) Name: ... Ph# .....

E-Mail (print); . (To receive ANNUAL UPDATE on this technique)

at East Greenbush Community Library on Thursday 5/4/11

1. The seminar was **Excellent** Very Good Good Not useful

2. I will use this technique to relieve my (concern) *stress,*

3. Comments/ Suggestions about the class (if any) .....

(Optional) Name: ..... Ph# .....

E-Mail (print), ..... (To receive ANNUAL UPDATE on this technique)

at East Greenbush Community Library on Thursday 5/4/11

1. The seminar was **Excellent** Very Good Good Not useful

2. I will use this technique to relieve my (concern) *insomnia*

3. Comments/ Suggestions about the class (if any) .....

(Optional) Name: ..... Ph# .....

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at East Greenbush Community Library on Thursday 5/4/11

1. The seminar was **Excellent** Very Good Good Not useful

2. I will use this technique to relieve my (concern) *muscle aches due to fibromyalgia + continue to improve quality of sleep*

3. Comments/ Suggestions about the class (if any) *—*

(Optional) Name: ..... Ph# .....

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at East Greenbush Community Library on Thursday 5/4/11

1. The seminar was **Excellent** Very Good Good Not useful

2. I will use this technique to relieve my (concern) *STRESS, ANXIETY*

3. Comments/ Suggestions about the class (if any) *Very pleasant and enjoyable.*

(Optional) Name: ..... Ph# .....

E-Mail (print):