



**HSHS
St. John's
Hospital**

**Mind-Body
Health Services**

HSHS St. John's Hospital
800 E. Carpenter Street
Springfield, IL 62769
217.544.LIVE (5483) • st-johns.org/mindbody

Lifestyle Management for Mind-Body Health

Mind-Body Health Services Payment Form
Check or credit card

Event Description:

Title of class: _____

Starting Date: _____

___ Payment by check (payable to HSHS St. John's Hospital)

___ Payment by credit/debit card (complete information below)

Type of card (Amer Exp not accepted): _____ Exp. Date (mm/yyyy): _____

Card numbers: _____

V-Code _____ (Last 3 digits on back of card) Amount \$ _____

Name: _____ Phone: _____

Address: _____

City/State/Zip: _____

Signature: _____