

About the Program

Elevate and Thrive is a transformative group experience designed to empower you through interactive workshops, dynamic group discussions, and personalized coaching sessions. Facilitated by Brett Carroll and Sherry Jones, LCSW this program offers:

- **Interactive Workshops:** Engage in sessions that combine insightful teachings with practical exercises to help you identify personal goals and overcome obstacles.
- **Dynamic Group Discussions:** Share experiences and strategies with like-minded individuals, building a supportive network for ongoing growth.
- **Personalized Coaching:** Receive guidance tailored to your unique challenges and aspirations, ensuring that you leave with actionable steps toward a more fulfilling life.
- **Comprehensive Resources:** Access workbooks, exercises, and take-home strategies that reinforce the lessons learned and empower your journey long after the program ends.

What You Will Take Away:

- **Clarity & Confidence:** Gain a deeper understanding of your personal goals and the tools necessary to achieve them.
- **Practical Strategies:** Learn actionable techniques to overcome obstacles and create positive change.
- **Support & Community:** Become part of a network of individuals committed to personal development and growth.
- **Renewed Purpose:** Leave with a renewed sense of purpose and a clear action plan to continue your personal transformation.

The program kicks off on March 24, 2025. For more details, please visit sherryjonescoaching.com

How to Register

1. **Complete the Form:** Fill out the registration form below.
2. **Submit Your Registration:** Email the completed form to sherryjones.lcsw@gmail.com.
3. **Enrollment Confirmation:** Expect confirmation of your enrollment within 24-48 hours.
4. **Payment:** After receiving confirmation, select your preferred payment option by clicking on the appropriate button above:
 - 6 Payments (weekly): \$100 per payment
 - Payment in Full: \$600 total

Elevate and Thrive Registration Form

Personal Information

- **Full Name:** _____
- **Email Address:** _____
- **Phone Number:** _____

Program Details

- Program Start Date: March 24, 2025
- How did you hear about us? _____
- Please briefly describe your personal development goals:

Payment Option

Please indicate your preferred payment plan:

- 6 Payments (weekly) – \$100 per payment
- Payment in Full – \$600 total

Agreement

By submitting this form, I acknowledge that:

- My registration will be reviewed, and I will receive an enrollment confirmation within 24-48 hours.
- Upon confirmation, I will proceed with payment using the appropriate payment button provided on the website.
- Signature: _____
- Date: _____

Submission Instructions

1. Complete the Form: Fill in all required fields above.
2. Email the Form: Send your completed form to sherryjones.lcsw@gmail.com.
3. Proceed with Payment: After receiving your enrollment confirmation, click on your chosen payment option:
 - 6 Payments (weekly) – \$100 per payment
 - Payment in Full – \$600 total