

Lunch & Learn

Clinic Address: _____

Telephone: () _____ Date: _____ Time: _____

Discussion: Hand Crafted Custom Foot Orthotics and Services Offered

Teaching Aid / Hand Crafted Orthotic Sample / Hand-Out



Happy Feet * Happy Life

Please Fax to: (613)830-1118

Looking forward to our Meeting

Lise Tremblay-Simard, C.Ped (C)
Clinic Manager

COMFY SOLES OTTAWA INC

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Tel: (613)830-5444 Fax: (613)830-1118

Email: comfysoles@outlook.com

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Contact Name: _____

Number of Physicians Attending: _____

Number of Staff Attending: _____

Circle the Menu of Choice:

1. Combination + Vegetarian Pizza with choice of Caesar Salad ___ or Garden Salad ___
2. Chicken Caesar Salad with choice of Zucchini Sticks ___ or Garlic bread _____
3. Variety of Sub Sandwiches: Chicken ___ Beef ___ Salami ___ BLT ___ Cold Cuts ___ Vegetarian ___

Comments _____

Allergies: _____

