

Thank You For Supporting Advantage Care Health Centers



Advantage Care Health Centers

is a comprehensive outpatient assessment and treatment program that provides the highest quality state-of-the-art clinical services to people with Autism Spectrum Disorders across their lifespan.

- Psychiatric Evaluations
- Medicine Management
- Psychotherapy Assessment
- Psychological Assessment
- Psychoeducational Assessment
- Neuropsychological Assessment
- Social Skills Groups



Learn more at:

www.advantagaredtc.org

Register and Donate Online:

www.advantagaredtc.org/TOBwalk

Walk For Autism
Town of Oyster Bay Parks Department
977 Hicksville Road
Massapequa, NY 11758




Join us for the 13th Annual



walk for Autism


to benefit Advantage Care Health Centers
Saturday, September 218, 2021

Join us for the 13th Annual

TOWN OF OYSTER BAY 

walk for Autism

to benefit Advantage Care Health Centers



Saturday | Sept. 18, 2021

John J. Burns Town Park
Merrick Road, Massapequa, NY

Registration - **10:00 am**
Walk begins - **11:00 am**

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Saturday
September 18, 2021

John J. Burns Town Park
Merrick Road Massapequa, NY

Registration
10:00 am
Walk begins at
11:00 am
Tailgate Party
to follow
Rain or Shine



JOSEPH SALADINO
Town Supervisor

Town of Oyster Bay Parks Department
Attn: Jackie Devlin - Recreation
977 Hicksville Rd.
Massapequa, New York 11758

Register and Donate Online:
www.advantagecaredtc.org/TOBwalk



Name _____

Address _____

Phone _____

Email _____

- ☐ Enclosed is my check payable to Advantage Care DTC or Register Online at
☐ MasterCard ☐ Visa ☐ American Express

www.advantagecaredtc.org/TOBwalk

Name on card _____

Card Number _____

Exp. Date _____

Signature _____

FOR INFORMATION, PLEASE CALL 516-797-7945

Please make checks payable to: Advantage Care DTC

Return registration form to:

Town of Oyster Bay Parks Department
Attn: Jackie Devlin - Recreation
977 Hicksville Rd.
Massapequa, New York 11758

REGISTRATION FEE:

- ☐ Individual: \$10
☐ Family (up to 5): \$25

Each registered walker
will receive a T-shirt and
admission to the tailgate party

T-SHIRT SIZE:

CHILD: ☐

ADULT: ☐ M ☐ L ☐ XL

I cannot attend the *Walk for Autism*
but would like to make a donation to
Advantage Care DTC in the amount of

\$

TOTAL AMOUNT ENCLOSED

\$