

School of Sahaj Energy Healing Application Form

Foundation Series

Bozeman, Montana
March 27-28, April 24-25, May 22-23

Name_____

Address_____

City/State/Zip_____

Phone_____ Email_____

Birth Date_____ Time/Place of Birth_____

Payment Information

____ Early Registration - due 2/26/10 - \$1125.00 (Payment may be made by check or credit card.)

____ Registration **after** 2/26/10 - \$1200.00 (Payment may be made by check or credit card.)

____ I would like to make 6 monthly credit card payments of \$205.00
(each payment includes a \$5.00 processing fee)

(Circle one) VISA/ MASTERCARD # _____

Expiration Date_____ Signature_____

Please make checks payable to: School of Sahaj Energy Healing.
Send application, payment, and photo to: 625 East Mendenhall, Bozeman MT 59715.
You will receive a confirmation letter with required homework, class location and times.

Personal Information

How did you hear about the school and why are you interested in this program?

Have you had any previous training in energy healing or have you been to a healer?

Please use the backside of this form to describe any significant physical, emotional or psychological issues you are working with. Include a brief medical history and any medications you are currently taking. Also send a current picture of yourself with this application. Thank you!