

Registration / Payment Form
May 2015 Class Seminars and Workshops

Venue: Dolce Norwalk Hotel & Conference Center

See detailed course descriptions and pre-requisites at www.marihall.com

Name: _____ Today's Date _____
(Print or type your name as you would like it to appear on your certificate – If repeating, list name as it appears on your attendance card.)

Address _____

Email Address: _____

Residence Phone: _____ Mobile Phone: _____
(area code and number) (area code and number)

Class/Seminar: _____ Date(s): _____

Class/Seminar Fee: \$ _____ - _____ = \$ _____
List Total Fee Less Earlybird discount if pd by 3/1/15 Balance Class Fee

PAYMENT METHOD AND AMOUNT PAID

Amount Paid: \$ _____ For: ___ Deposit ___ Partial Payment ___ Full Payment ___ Balance Due

___ Cash or Bank Check Enclosed ___ Credit Card Payment (amount listed above) on _____
(Please do not mail cash.) (Date)

___ Check Enclosed (Check # _____) Please issue all checks payable to: "Mari Hall"

___ *I am not paying at this time and understand that registration is first-reserved by deposit or full payment.*

PAYMENT INSTRUCTIONS

***Please issue all checks to "Mari Hall" and mail this form along with your payment to:**

Jikiden Reiki Connecticut
95 Harris Street • Fairfield, CT 06824
info@JikidenReikiCT.com • Tel. 203.254.3958