

**To Register for a NeuroSoma® Seminar by Mail**, Please PRINT OUT and complete the form below; include Money Order or Cashier's, Personal, or Business check, made out to Tamsin Stewart, and send to 11 Doris Drive, Ruckersville, VA 22968.

*Registration includes a \$150.00 nontransferable, nonrefundable processing fee.*

If you have any questions, please contact our office at 434-985-1213, or at [info@neurosoma.com](mailto:info@neurosoma.com)

## **NeuroSoma® Seminar Registration Form**

**Paying with Check or Money Order**

***\*All Information Required***

**Name:** \_\_\_\_\_

**Occupation(s):** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Daytime/Evening Phone:** \_\_\_\_\_ **/Mobile Phone** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

Please list any Allergies and/or medical conditions we need to be aware of: \_\_\_\_\_

**Course Level** *Please Circle Appropriate Number*      1      2      3      4

**Course Dates:** \_\_\_\_\_

**Course Location:** Charlottesville, Virginia /**Other** *(please specify)* \_\_\_\_\_

**Amount Enclosed:**       \$600 Full Pmt 1 Level (Levels 1 through 4)

\$1600 Package for Levels 2, 3, & 4 Paid in Advance

**Paying With:**       Check       Cashier's Check       Money Order

**NOTE:** If you are registering for Level 1, Please Remember to Attach a Signed Copy of the

**Student Copyright Agreement.....**  Enclosed

Only a completed Registration form, accompanied by payment, is considered a full registration and is required for admittance to class. Thank you for your participation.  
We look forward to seeing you.