

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

NeuroSoma® Seminar Registration Form

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: (Note: If using PayPal, PayPal Fees Add Additional Cost to all Prices) _____

\$600 Full Pmt 1 Level (Levels 1 through 4) \$1500 for Levels 2, 3, & 4 Paid in Advance

Paying With: Credit Card (PayPal) 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.