

Pre-registration Form

“Authentic Relationships”

Level 2 Teacher Training

October 2010 Toronto, Ontario

Legal Name (print): _____
(Last) (First) (Middle)

Spiritual Name (print): _____
(Last) (First) (Middle)

Mailing Address: _____

City: _____ Province/State: _____ Postal/Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

Birth Date: _____
(Month/Day/Year)

Amount Paid: _____

Type of Payment (indicate cheque or PayPal): _____

Level 1 Training: Lead Trainer: _____ Date: _____ Location: _____

List previous Level 2 courses: _____

Cancellation Policy

All requests for refunds due to inability to attend may be subject to a fee deduction of \$300. All requests must be made in writing and sent to Nirmal Singh via email or mail by September 24th. No refunds will be authorized once a participant has begun the course. Thanks for your understanding.

Signature (Legal Name): _____ Date: _____

Please email this completed form to LEVEL2@TorontoKundaliniYoga.com or mail to The Wellness Path at 348 Palmerston Blvd. Toronto, Ontario M6G 2N6