



KHADRO SCHOOL OF CHI NEI TSANG

REGISTRATION FORM

Name: _____

Address: _____

City _____ Province _____ Postal Code: _____

Day Ph. #: _____ Night Ph # _____ Fax _____

Email _____ Emergency Contact Person & Ph.# _____

Other trainings/certification you have taken:

Health Concerns: _____

Please indicate with an "x" the classes you wish to attend.

	<u>Total Cost</u>	<u>Deposit</u>	<u>Balance</u>
Foundation Healing Tao Class	_____	_____	_____
Healing Love-Sexual Practice	_____	_____	_____
Fusion I	_____	_____	_____
Iron Shirt Chi Kung I	_____	_____	_____
TOTAL	_____	_____	_____

Methods of Payment: A non-refundable deposit of 50% of the course total is required upon registration. The balance is due the morning after your arrival at the sign in. Methods of payment include; cheque, cash or money order. Please send your cheque or money order payable to:
Dorothy Ramien, 65 Coe Hill Dr., Toronto, ON M6S 3E2.

REGISTRATION: You may register online at www.khadro.com and please send your application with you cheque or money order to the address indicated above. THANK YOU.