



Ad Humanitas  
towards humanity

## Ontological Mastery Workshop and Conference

September 3- 17<sup>th</sup>, 2008

### REGISTRATION FORM

#### Basic Contact

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City, State, Zip code \_\_\_\_\_  
 Telephone \_\_\_\_\_ Email \_\_\_\_\_

#### Emergency Contact

Name \_\_\_\_\_ Relationship to you \_\_\_\_\_ Phone \_\_\_\_\_  
 Name \_\_\_\_\_ Relationship to you \_\_\_\_\_ Phone \_\_\_\_\_

#### Medical Information

Please list any dietary restrictions you may have:

Please list any medical conditions we should be aware of:

#### Workshop Registration Selection

Select		Prior to July 31	After Aug 1	List total
<input type="checkbox"/>	<b>Complete Retreat</b>	1350	1450	
	Meals and Accommodation	770	770	
<input type="checkbox"/>	<b>Option 1 Only</b>			
	Workshop and Conference	850	950	
	Meals and Accommodation	550	550	
<input type="checkbox"/>	<b>Option 2 Only</b>			
	Workshop and Conference	650	750	
	Meals and Accommodation	385	385	
<input type="checkbox"/>	<b>Topic to present at conference (optional)</b>	<b>FREE</b>	<b>FREE</b>	
	<b>Time needed/ equip</b>			
<input checked="" type="checkbox"/>	<b>INI Database</b>	<b>New</b>	<b>Update</b>	
		750	375	
				<b>Grand Total</b>

#### Payment Information

Name on Card \_\_\_\_\_ Expiration Date \_\_\_\_\_  
 Card Type (circle one): Visa \_\_\_\_\_ MasterCard \_\_\_\_\_  
 Card Number: \_\_\_\_\_ Three digit security code on back of card \_\_\_\_\_

*By signing this, I agree to have the above credit card charged in a single installment / thee equal installments (circle one) to be paid in full prior to the date of the workshop. I understand that there is a \$550 non-refundable deposit applicable towards my workshop cost.*

Print Name \_\_\_\_\_ Signature \_\_\_\_\_

Please sign and return to Mila Le, mila@adhumanitas.com | 503.863.9112