

The Yoga of
Writing

Name _____

Phone h (_____) _____ c (_____) _____

Street Address _____

City _____ State _____ Zip _____

Email Address _____

How did you hear of the retreat? _____

Have you been instructed in meditation? And if so, what kind? _____

List mental/physical/emotional health concerns/limitations and prescription medications:

Register by phone: (928) 204-0067, or send to Sedona Meditation Training, P.O. Box 1178, Sedona, AZ 86339. Or, fax (866) 654-1705, or email sedonameditation@gmail.com.

The retreat fee includes 4 meals. Lodging is available for an additional fee. A confirmation letter will be emailed to you with more information. Check which applies:

- Early registration, 30 days in advance \$325 per person**
- Regular registration, \$425 per person**
- Add \$150 for two nights' shared accommodations in a rustic cabin at the retreat center**
- Companions, take 15% off when you register together (cannot be use with other promotions)**

Payment Policy: 50% deposit is required to reserve your space, and can be made by check or credit card. Balance due 10 days prior to retreat. **Cancellation policy:** Your deposit is fully refundable less a 20% cancellation fee if you cancel in writing at least 10 days before the retreat. After that date, it is non-refundable, but is transferable and can be applied in full to another meditation course or retreat with the Sedona Meditation Training Co. within a year. **If you cancel less than 48 hours before the retreat, your retreat fee will be forfeited. MC, Visa, or AMEX and checks are welcome.**

CC # _____ CC Expiration Date _____

Signature _____ Date _____

Disclaimer: My decision to participate in the Yoga of Writing Retreat is a personal decision. I have not been made any promises or warranties that I will receive any benefits or specific results. I understand that meditation is not a substitute for treatment or services ordinarily provided by health care professionals for physiological or psychological complaints. I further understand that any instruction given to me during the course is for me personally and may not be appropriate for others. In consideration for teaching, I hereby agree to hold Sarah McLean, Illumine LLC, Sedona Meditation Training Co., Victoria Nelson, and their officers, agents, and employees harmless in any claims brought by me, or on my behalf, which contradict the above. My signature above constitutes my acceptance of the conditions expressed in the agreement.

OFFICE USE: Fee _____ Deposit Rec'd _____ Bal Due _____ Conf Sent _____ Eval _____ QB _____ CC _____