

ADVANCED SHAMANIC PRACTICE

TRAINING

MASTER PRACTITIONER PROGRAM

ENROLMENT

Name:

Address:.....

.....postcode.....

Phones:

Home Phone :

Business Phone :

Mobile :

Email :

Contact person (in emergency):

Emergency Contact Phone :

Fees : The total cost of the course is \$10,000.00

Payment can be made in the following ways:

Payment Options:

1. \$1000.00 deposit plus 4 x payments of \$2250.00 or
2. 4 x payments of \$2500.00 or
3. \$1000.00 deposit plus \$500.00/month for 18 months or
4. Pay full fee in advance (5% reduction)

My payment:

Option chosen: 1. [] 2. [] 3. [] 4. []

Direct deposit preferred: Bank of Queensland, Dr. R. Locke
BSB: 124-001 Acc #: 22531427

OR

Credit card details : My Visa [] or Master Card []details are:

Card Number:

Expiry date:/...../.....

Name on Card:

Signature:

Further information:

Dr. Rafael Locke: 0417-964-777;
email: rafael43@bigpond.com