5850 Canoga Ave. #400 Woodland Hills, CA 91367 www.eacseminars.com

REGISTRATION FORM

"Investment in the present is an investment in the future."

PERSON	AL INFORMATION	Please print legibly
Last Name	First Name	
Sex: F	D.O.B Marital Status Si M Se Di W DP Occupation	
Address		Apt#
City	State	Zip
Home #	Area Code Cell #	
EMAIL Mandatory		
Referred by	EMERGENCY CONTACT	
Relation	Telephone Area Code	

NOTICE OF IMPORTANT INFORMATION

Educational Awakening Center (EAC) workshops are designed to support people in being more effective in realizing and reaching their personal goals. Through a series of informative lectures, experiential exercises, and voluntary sharing. The workshops provide the space for people to create new possibilities and to express themselves in their natural and genuine form, therefore creating great personal reward.

EAC's workshops are intended for people who are well. The workshops are not meant for pregnant individuals, nor are they meant to be therapeutic or substitute for medical treatment or psychotherapy. If you or anyone in your family has a history of mental illness or serious emotional problems, we recommend that you consult with a mental health professional about your ability to handle stress. If this may be an issue, we recommend that you do not participate in the program. If you have any questions, please contact EAC.

GOALS	
To help you to benefit fully from your participation in EAC's workshop(s), we ask that you take a moment to state specifically vintend to accomplish. Answering this question does not suggest or guarantee that you will achieve these specific results by the program. However, by being specific, you will facilitate your participation. Please print your answer in the space below (value) attach additional pages, if necessary).	e end of
What do you intend to accomplish?	
Use additional paper, if nec	cessary



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WORKSHOP OF INTEREST (please check the workshop or seminar of interest)

CLASS	COST	PRE-I	REGISTRATION RATE	POLICY (Read Thoroughly and Initial)
DISCOVERY	\$795	*\$695	* If	A non-refundable deposit of \$300.00 is required to reserve your place in this
QUANTUM MASTERY	\$745	*\$645	* If paid in FULL in one installment and submitted along with all completed forms. Offer	workshop. In case of cancellation, a written request MUST be received at least 30 days prior the workshop start date, at which time \$300 of fees paid are non-refundable. If you register with less than 30 days before the start of the seminar, you fully
TEEANGE GROUP	\$495	*\$445	not valid for registration on the first day of workshop.	understand you are waiving your right to cancellation and that you are limited to to options listed below.
INNER CHILD	\$745	*\$645		If written request for cancellation is received less than 30 days prior to the works start date the following options apply, otherwise all fees paid are non-refundable. Upon receipt of written request for postponement, received no less than 48 hours prior to the workshop start date, 1st \$100 of fees paid is non-refundable and the remaining balance is transferable as a credit to be applied to the full cost (\$795) of the next scheduled workshop of the san name; OR Upon receipt of written request for transfer of fees to another individual, received no less than 48 hours prior to the workshop start date, 1st \$10 of fees paid is non-refundable and the remaining balance is transferable as a credit to be applied to the full cost (\$795) for the named individual the current workshop only. All fees paid are non-refundable upon start of the workshop. Effective April 1, 2014, in case of a "no show," a credit for the amount paid less the non-refundable deposit, may be applied to the full cost (\$745/95) of the next schedu workshop of the same name only. This credit will be held in participants name an is non-transferable.
				Workshop location subject to change.
TRANSFORMATION	\$2,295	**\$2,095	** If paid in FULL in one installment along with all completed forms within specified time frame.	If deemed necessary, enrollment into Transformation workshop or SELP will based upon personal interview. A non-refundable deposit of \$500.00 is required to reserve your space in eit the Transformation Workshop or SELP. If you register with less than 30 days before the start of the workshop, you funderstand you are waiving your right to cancellation.
S.E.L.P. (Self Expression & Leadership Program)	\$1,495	N/A	N/A	In case of cancellation, a written request MUST be received at least 30 days price the workshop start date, at which time \$500 of fees paid are non-refundable. If written request for cancellation is received less than 30 days prior to the works start date the following options apply, otherwise all fees paid are non-refundable. Upon receipt of written request for postponement received no less than hours prior to the workshop start date, 1st \$500 of fees paid is non-refundable and a credit for the remaining balance is transferable and may be applied the full cost (\$2295) for the next scheduled Transformation Workshop onl (\$1495) for SELP; OR Upon receipt of written request for transfer of fees to another indivice received no less than 48 hours prior to the workshop start date, 1st \$50 fees paid is non-refundable and a credit for the remaining balance transferable to another individual and may be applied to the full cost (\$22 for the named individual for the current Transformation Workshop or (\$14 for the current SELP only. All fees paid are non-refundable upon start of the workshop.
				Workshop location subject to change Initial
TE OF WORKSHOP:				Visit www.EACseminars.com for a list of other workshops

Cas	sh	DO NOT	send cash	n by mail	\$	Received by	
Che	eck*	Check#			\$	DL#	State
	*	RETURN	CHECKS	SUBJECT	TO \$45.00 FEE.	PRICE SUBJECT TO CHANGE WITHOUT	NOTICE
Cred	dit Card	Cardholde	ers Name				3 Digit Code
		МС	Visa	Dis	\$	cc#	Exp Date

Credit Card	Cardholde	ers Name					3 Digit Gode
	МС	Visa	Dis	\$	cc #		Exp Date
				Auth#			
	Address				City	State	Zip

I, the undersigned, have thoroughly read and understand ALL "POLICY" information pertaining to the workshop of interest. I authorize Educational Awakening Center (EAC) to charge my credit card for the specific charges. This authorization is to be held for EAC's information only and will not be released to any unauthorized persons.

Signature: X Date

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