

To Register for Classes you can either contact Susan Cossette NCTMB at 920-428-2181 or simply copy, paste and fill out the form below to either send by mail, Email or text with your down payment. For more information about the classes visit us at www.healthandhealingzone.com

Fill in this bottom portion and mail with your payment to the instructor

To guarantee your spot please send in registration no later than 10 days before day of class. We reserve the right to cancel any class, in which case the registration fee will be returned in full.

Title of Class you are registering for

Name as you would like it to appear on your certificate

Address/City/State/Zip

Phones: Home

Cell

Work/Other

E-mail address

Date of Workshop

Required Down Payment Deposit (Reiki 1 - \$85., Reiki 2 - \$125., Reiki Advanced - \$200, Reiki Master - \$200., Karuna Reiki - \$400., Swedish Stone Massage - \$125., Northern Thai Massage Part 1 Supine - \$125., Northern Thai Massage Part 2 prone, side & seated - \$125., Rainessence Aroma Therapy - \$75., Sounds of Healing Workshop - \$65., Foot Reflexology Basic Course - \$125., Foot Reflexology Practical Workshop - \$50., Foot Reflexology Professional Course - \$125., Cranial Sacral Intro Course - \$85., Myofascial Release Intro Course - \$85., Lymph Drainage Massage Intro Course - \$85.)
or pay in full (See class list for full cost of classes)

I am sending my down payment or payment in full of \$_____ amount by personal check, money order, or cashier's check with the remainder to be paid at the beginning of the first day of class. I understand I may cancel my registration up to 14 days before the class. My registration fee will be refunded before that time only. If I need to cancel less than 14 days to 2 days prior to the class I may apply my fee to another class of my choice. **When cancelling in less than 48 hours prior to class I understand that I will not receive a refund or the opportunity to apply my payment to another class.** Absolutely no exceptions on this policy.

Signature & Date _____

Make check payments payable to Health and Healing Zone.

Send to Health and Healing Zone

48 Springbrook Cercle Drive

Appleton, WI 54914

Or pay by: MasterCard or Visa: Card number _____

Expiration Date _____ and 3 digit security ID# _____ Zip Code _____

(you may also call me with this information)

Once you are registered for the class you will receive a confirmation Email which will confirm your class location. Supplies that may be needed for the class will be 1 massage table per 2 students, each student are required to bring a set of sheets or a blanket to cover the massage table, a pillow case or face cradle cover. More supplies may be required depending on the class. The final list will be sent no later than 1 week prior to class.