



WORKSHOP REGISTRATION

NAME OF WORKSHOP \_\_\_\_\_  
DATE(S) \_\_\_\_\_ TIME(S) \_\_\_\_\_  
PLACE \_\_\_\_\_ COST \_\_\_\_\_

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ COUNTRY \_\_\_\_\_  
PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_  
FOOD ALLERGIES AND/OR REQUIREMENTS \_\_\_\_\_

ALL PAYMENTS TO BE MADE TO: ENLIGHTENING PRODUCTIONS

DEPOSIT \_\_\_\_\_ BALANCE DUE \_\_\_\_\_ CASH \_\_\_\_\_  
CHECK \_\_\_\_\_  
CREDIT CARD# \_\_\_\_\_ TYPE \_\_\_\_\_  
EXP \_\_\_\_\_ CODE \_\_\_\_\_

Need Room & Board? Yes, I need a list of accommodations \_\_\_\_\_  
No \_\_\_\_\_

Waiver:

I (participant's name) \_\_\_\_\_ am aware of the training that I am to participate in with Enlightening Productions and that it can or may contain risks to my physical, emotional, mental or spiritual self as well as any of my belongings.

I (participant's name) \_\_\_\_\_ hereby assume all risks and responsibility. I voluntarily waive all claims against the above-mentioned as well as the facility. I also waive the right for a third party contingent in connection with my participation with the abovementioned. This agreement shall serve as a release, assumption of risk/responsibility and hold harmless provisions for the abovementioned and the facility. I have read and agree to these terms and conditions.

Participant's signature: \_\_\_\_\_

Date: \_\_\_\_\_

Emergency Contact Information:

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Refunds:

ALL refund requests must be made in writing. For all requests made 30 days prior to the first day of class, you will receive a full refund less a \$75 per person processing fee. For all refunds requested between 8-29 days prior to the first day of class, you have your choice of receiving (1) Your original deposit minus the \$75 processing fee divided by 2; (2) Your original deposit minus the \$75 processing fee toward any other Healing Arts Center workshop. No refunds for cancellations made 1-7 days prior to the first day of class or for No Shows.

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