

Please do not alter the format of this document. If you need more space add another page and cross refer to it.

Registration Form

Establishing Healthy Connections

18-21 March 2012, UK

Facilitated by Dr Ray Castellino DC (Ret'd) & Mary Jackson LM, RN, RCST®

Name					
Birth Date		Age	Country of Birth		
Address					
City	State/County		Post Code		
Phone	Home	Work	Mobile/Cell		
Email	Main	Alternate			
How did you hear about this Seminar?					
Profession/ Registrations e.g MD, RCST etc.					
What is your area of professional work?					
Please give some background information about yourself that you would like us to know:					

Payments

Please complete the following: **Prices include Seminar tuition and Full Board Accommodation.**

Full details about prices, payment due dates, and **Bank Transfer information** are included under the Terms and Conditions on the web site. See below for link information.

Description	Amount Due UK£			Amount Sent UK£
	Full Residential	Off Site	Camping	
<u>Part Payment Option</u>				
Non Refundable Deposit paid before 18 th Sept 2011	£230	£230	£230	
Non Refundable Deposit paid after 18 th Sept 2011	£240	££240	£240	
Balance Payment before Early Bird cut-off date‡	£359	£276	£306	
Balance Payment after Early Bird cut-off date‡ if deposit paid before the Early Bird cut-off date‡	£399	£316	£346	
Balance Payment after Early Bird cut-off date‡ if deposit paid after the Early Bird cut-off date‡	£419	£336	£366	
Balance Payment after 28th Feb 2012 including late charge	£439	£356	£386	
<u>Full Payment Option</u>				
Full Payment before paid before 18 th Sept 2011‡	£599	£516	£546	
Full Payment after 18 th Sept 2012 and before Early Bird cut-off date‡	£599	£516	£546	
Full Payment after Early Bird cut-off date‡	£659	£576	£606	
Total Course/Residential fee being paid with this form*				£

#18 January 2012 is the *Early Bird* cut-off date

Note that the Balance Payments must be received by 28th February 2012. Payments after this date will be subject to an additional fee of £20 as shown above, unless agreed otherwise by email with David Haas.

The above pricing incorporates the discounts on offer as per the web site terms and conditions that have been revised 4 January 2012. **If you wish to apply for the referral fee contact David directly.**

Payment method

I am sending my payment using the following method – complete the table below by deleting *as applicable and entering date sent. **Note that all payments to be made in the name of Raymond Castellino and that payment by bank transfer (UK or International) is preferred.** If you are paying by cheque and/or returning the form by post contact David in the UK first.

Bank transfers can be made to the following account:

Account Name: Raymond Castellino HSBC Bank Plc, 39 High Street, Ashford, Kent TN24 8TG			
For transfers from UK Banks		For Transfers from Non UK Banks	
Sort code	40-08-32	UK Swift:	MIDLGB22
Account number	22022699	IBAN:	GB16MIDL40083222022699

Please ensure your Name and RCMarch12 are included in the reference

Note that if you wish to pay with cash

you need to contact David before paying the money into the bank.

Paying For	Bank Transfer	Enclosed with this form	Date Sent (DD/MM/YY)
NRD	UK* / International*	UK bank cheque *	
Balance	UK* / International*	UK bank cheque *	
Full Payment	UK* / International*	UK bank cheque *	

Accommodation

I would like to share with the following participants if possible. I have already spoken with them and agreed this. (Each person should include the others they wish to share with on their form)

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Let us know your order of preference for your accommodation. All participants will initially be required to stay in Florence House. Once this is full your preferred option will be offered to you. Accommodation preferences will be honoured in order of both receipt of registration and payment.

Put '1' for the most preferred option and 3 for the least.

Location	Order of Preference	Price Reduction on Basic Pricing
Florence House main building		£0
Florence House camping		£54
Off Site accommodation		£84.00

Special Diets, Meat, Chicken and Fish Order

I require the following special diet (mark the relevant box) and understand that the additional price charged by Florence House is **£3.50 per meal**. The total amount due is payable directly to Florence House on arrival.

Vegan diet: Wheat free Gluten free diet: Dairy free diet:

The meat/ chicken/ fish alternative will only be available on one of the meals on the Sunday, Monday and Tuesday: Only one of the three, e.g. fish, will be available per meal. There will be the vegetarian option available at each meal for which there is no additional charge. **The price charged is £3.50 per special meal and is payable to Florence House on arrival.**

I would like to order as follows:

Please number, 1,2 etc. in order of preference. 1 indicates most preferred and include 'X' if you do not want that dish. If there are not enough participants requesting one or more of the dishes it will probably not be offered and you will be advised.

Meat dish	<input type="checkbox"/>
Chicken	<input type="checkbox"/>
Fish dish	<input type="checkbox"/>

Data protection:

Please note that if you are accepted onto the Seminar, your contact details will be distributed on a participant list prior to the start date, but only to students and Training Staff. We NEVER release details of our students to outside organisations or individuals without their permission to do so. If you do **not** wish your details to be circulated to the other participants of your course, please tick here

Please sign and return this form to us by email as an attachment. You may type your signature if you are emailing and are unable to sign by hand and scan the page to email.

If this is a problem contact David Haas +44 (0) 1483 423352.

Your signing the application form signifies your understanding and acceptance of our terms and conditions as detailed on the web site

<http://www.First-Expression.co.uk/castellino.htm> (or go to the web site www.First-Expression.co.uk and select Castellino UK Visit)

I,,
(Full Name in capitals) agree to the terms and conditions stated above.

Signature

Date

Important Note – Please Read Before sending your registration form and payment.

This is an Experiential Seminar and **NOT** a Womb Surround Process workshop. If you are not clear on the difference please contact us before booking your place on the seminar.

Office Use	Form Received	Deposit Received	Balance Received	Full Payment Received
Date				
Method				