



Last Name  First Name

D.O.B.  Cell #  Area Code

**EMAIL**   
Mandatory

**WORKSHOP OF INTEREST**

<input checked="" type="checkbox"/>	WORKSHOP	DATE
	Transformation	
	Quantum Mastery	
	Inner Child	
	Self Expression & Leadership Program (S.E.L.P.)	
	Other:	

I, the undersigned, hereby agree that all **PERSONAL, HEALTH,** and **MEDICAL** information remain the same as completed in my last workshop of attendance and that no changes have incurred in relation to my personal, health and/or medical conditions.

By applying for the workshop selected, both on the left and on the next page, I, the undersigned, agree to the following:

Although the workshops/sessions conducted by Educational & Awareness Center (E.A.C.) remain confidential by the trainer, there are some exceptions to this rule. If child abuse, abuse of an older person or dependent, suicide or homicide is suspected, E.A.C. is mandated by law to report any and all of these suspicions to the right authorities, without option.

I understand that this workshop is not rendered for individual's who need psychiatric attention. During the course of the workshop, if at anytime the trainer feels I am having an extreme emotional outburst due to psychiatric issues, I will be discharged from the training and seek appropriate medical attention.

I have thoroughly read and understand ALL **"POLICY"** information pertaining to the workshop I have registered for. I take full responsibility for all my actions during the upcoming seminar/workshop. Additionally, I take full responsibility for participating in the entire duration of the workshop, as scheduled, and understand that my failure to do so will result in discharge from the workshop without return and/or transfer of funds. I also understand that, if necessary, the Trainer holds the right to discharge me from the workshop without return and/or transfer of funds.

I am aware that the leaders and staff of the seminar/workshop are not in any way liable for any physical or emotional distress or damage that may be caused. I am attending this seminar/workshop at my own will.

Signature: **X** \_\_\_\_\_ Date: \_\_\_\_\_

**GOALS**

To help you to benefit fully from your participation in E.A.C.'s workshop(s), we ask that you take a moment to state specifically what you intend to accomplish. Answering this question does not suggest or guarantee that you will achieve these specific results by the end of the program. However, by being specific, you will facilitate your participation. Please print your answer in the space below (you may attach additional pages, if necessary).

**What do you intend to accomplish?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Use additional paper, if necessary



Applicant's Last Name

First Name

DOB     
Mo Day Year

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

✓	CLASS	COST	PRE-REGISTRATION RATE	POLICY (Read Thoroughly and Initial)
	QUANTUM MASTERY	\$695	*\$645	* If paid in FULL in <b>one installment</b> and submitted along with all completed forms. Offer not valid for registration on the first day of workshop.
	INNER CHILD	\$695	*\$645	
	TRANSFORMATION	\$2,195	** \$1,995	** If paid in FULL in <b>one installment</b> and submitted along with all completed forms at least 30 days prior to workshop start date.
	S.E.L.P. (Self Expression & Leadership Program)	\$1,495	N/A	

- A non-refundable deposit of \$300.00 is required to reserve your space in this workshop.
- In case of cancellation or postponing, a **written request MUST** be received at least 30 days prior to workshop start date, otherwise total tuition is non-refundable and non-transferable.
- Upon receipt of written request, 1<sup>st</sup> \$200 of tuition is non-refundable, and the remaining deposit balance of \$100 is transferable only to the next scheduled workshop of same title.
- Upon start of workshop, total tuition is non-refundable.
- Tuition is not transferable to another individual.
- Due to the nature of the workshop, I understand that I need to be present for all the hours of the workshop, otherwise, I may be discharged without refund.
- Trainer has right to discharge any person he deems necessary, without refund.
- Workshop location subject to change. Initial

- A non-refundable deposit of \$500.00 is required to reserve your space in this workshop.
- If deemed necessary, enrollment into workshop will be based upon personal interview.
- In case of cancellation or postponing, a **written request MUST** be received at least 30 days prior to workshop start date, otherwise total tuition is non-refundable and non-transferable.
- Upon receipt of written request, 1<sup>st</sup> \$300 of tuition is non-refundable, and remaining deposit balance of \$200 is transferable only to the next scheduled Transformation workshop.
- Upon start of workshop, total tuition is non-refundable.
- Tuition is not transferable to another individual at any point.
- Due to the nature of the workshop, I understand that I need to be present for all the hours of the workshop, otherwise, I may be discharged without refund.
- Trainer has right to discharge any person he deems necessary, without refund.
- Workshop location subject to change. Initial

**DATE OF WORKSHOP:**  Visit [www.EACseminars.com](http://www.EACseminars.com) for a list of other workshops

**PAYMENT AUTHORIZATION**

Cash	<b>DO NOT send cash by mail</b>	\$	Received by	
Check*	Check#	\$	DL# State	
<b>* RETURN CHECKS SUBJECT TO \$45.00 FEE. PRICE SUBJECT TO CHANGE WITHOUT NOTICE</b>				
Credit Card	Cardholders Name			3 Digit Code
	MC	Visa	Dis	Am Ex
	\$		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 & Awareness Center (E.A.C.) to charge my credit card for the specified charges. This authorization is to be held for E.A.C.'s information only and will not be released to any unauthorized persons.

Card Holder's Signature:  X  Date \_\_\_\_\_

FOR OFFICE USE ONLY						Balance
Date	Cash	Check#	ccAuth#	Amount	Rcd By	\$