



Québec Cooperative Avatar® Course Student Registration

728 Indiana St., Lawrence, KS 66044, USA

Phone 785-550-2121

Fax 913-273-0085

March 29 – April 6, 2008

www.InternationalAvatarCourse.com

Name: _____

Address _____

City _____ Province/State _____

Postal code _____ Country _____

Telephone # _____

Fax # _____

E-mail _____

My Master's Name: _____

◆Registration starts at 8:15 a.m. on Saturday morning

◆ Fill out your hotel accommodation form and fax it in as soon as possible. **If you need one, contact:**

George Thompson
ph: 785-550-2121
geothomp@sbcglobal.net

EMERGENCY CONTACT:

Name: _____

Number: _____

NEW STUDENTS:

◆Please return this form, **along with your payment**, directly to your Avatar® Master.

◆Check with your Master to see if they accept credit card payments.

- The ReSurfacing® Workshop. My course fee is: \$295.00 CAD
- Section 2. My course fee is: \$500.00 CAD
- Section 3. My course fee is: \$1500.00 CAD
- The full Avatar® Course. My course fee is: \$2295.00 CAD

REVIEWING STUDENTS:

- ◆Return this form with your payment to:
The Cooperative Avatar® Course (address above)
- ReSurfacing Review \$80.00 CAD
- Full Avatar Review \$360.00 CAD

◆We accept most major credit cards.

Credit Card #: _____

Amount: _____ Exp. date _____

Signature: _____

IMPORTANT INFORMATION:

Please answer the following questions so we can be in the best possible position to support you while doing your Avatar course. (Use an extra sheet if necessary). *Note: The Avatar Materials are for self-evolvement; they are not designed to address specific emotional issues, nor are they to be considered as a replacement for medical treatment or sensible psychological counseling.*

1. Are you currently under any medical or psychiatric supervision (including psychotherapy or counseling)? If yes, please explain. Also include dates, duration and outcome: _____
2. Are you currently taking any prescription or recreational drugs? If yes, please give the name of the drug, frequency of usage and purpose of taking: _____
3. Have you ever been subject to a traumatic injury or violent attack? If yes, please give details: _____