

ESSENTRICS SYMPOSIUM APRIL 14-20 2018

REGISTRATION FORM

Please send your completed registration form and payments via:

Email: maude@essentrics.com

Mail: The Esmonde Technique 426 rue Sainte-Helene, suite 300, Montreal QC, H2Y 2K7, Canada.

Fax: 1-866-576-3128

PERSONAL INFORMATION

PARTICIPANT #1:

Full Name: _____

Age Group: 20s 30s 40s 50s 60s 70+

Home Address: _____ City: _____

State/Prov: _____ Zip Code/ Postal code _____

Country: _____

Telephone: _____ Email _____

Emergency contact name: _____ Telephone: _____

Please mention any relevant medical history (Food allergies, heart condition, blood pressure, arthritis, back or neck problems, etc...):

PARTICIPANT #2:

(Sharing room with participant #1)

Full Name: _____

Age Group: 20s 30s 40s 50s 60s 70+

Home Address: _____ City: _____

State/Prov: _____ Zip Code/ Postal code _____

Country: _____

Telephone: _____ Email _____

Emergency contact name: _____ Telephone: _____

Please mention any relevant medical history (Food allergies, heart condition, blood pressure, arthritis, back or neck problems, etc...):

I PREFER TO HAVE A ROOM WITH:

1 king-sized bed (available for single or double-occupancy)

2 full-size beds (available for double-occupancy only)

Note: We will try to accommodate your bed type preference, but we cannot guarantee your selection. Based on room availability.

ALL PRICES ARE IN US DOLLARS AND INCLUDE TAXES

*Attendees outside of the USA will pay in US funds at the current exchange rate.

PARTICIPANT #1: _____

FITNESS HOLIDAY:	Single Occupancy		Double Occupancy (Per person)	
	\$2095.00 White Sands Hotel	<input type="checkbox"/>	\$1575.00 White Sands Hotel	<input type="checkbox"/>
	\$1995.00 Kantenah/Colonial Hotel	<input type="checkbox"/>	\$1515.00 Kantenah/Colonial Hotel	<input type="checkbox"/>

TEACHER TRAINING:	Single Occupancy		Double Occupancy (Per person)		
	Workshop only:	\$2095.00 White Sands Hotel	<input type="checkbox"/>	\$1575.00 White Sands Hotel	<input type="checkbox"/>
		\$1995.00 Kantenah/Colonial Hotel	<input type="checkbox"/>	\$1515.00 Kantenah/Colonial Hotel	<input type="checkbox"/>

One Level LTT:		\$2295.00 White Sands Hotel	<input type="checkbox"/>	\$1825.00 White Sands Hotel	<input type="checkbox"/>
	Level: _____	\$2195.00 Kantenah/Colonial Hotel	<input type="checkbox"/>	\$1795.00 Kantenah/Colonial Hotel	<input type="checkbox"/>

Two Levels LTT:		\$2505.00 White Sands Hotel	<input type="checkbox"/>	\$2080.00 White Sands Hotel	<input type="checkbox"/>
	Level 1-2 <input type="checkbox"/>	\$2400.00 Kantenah/Colonial Hotel	<input type="checkbox"/>	\$1995.00 Kantenah/Colonial Hotel	<input type="checkbox"/>
	Level 3-4 <input type="checkbox"/>				

GUEST:		Double Occupancy (Per person)	
Will not participate in any Essentrics activities.		\$1190.00 White Sands Hotel	<input type="checkbox"/>
		\$1125.00 Kantenah/Colonial Hotel	<input type="checkbox"/>

PARTICIPANT #2: _____
(*Sharing room with participant #1)

FITNESS HOLIDAY:	Double Occupancy (Per person)	
	\$1575.00 White Sands Hotel	<input type="checkbox"/>
	\$1515.00 Kantenah/Colonial Hotel	<input type="checkbox"/>

TEACHER TRAINING:	Double Occupancy (Per person)		
	Workshop only:	\$1575.00 White Sands Hotel	<input type="checkbox"/>
		\$1515.00 Kantenah/Colonial Hotel	<input type="checkbox"/>

One Level LTT:		\$1825.00 White Sands Hotel	<input type="checkbox"/>
	Level: _____	\$1795.00 Kantenah/Colonial Hotel	<input type="checkbox"/>

Two Levels LTT:		\$2080.00 White Sands Hotel	<input type="checkbox"/>
	Level 1-2 <input type="checkbox"/>	\$1995.00 Kantenah/Colonial Hotel	<input type="checkbox"/>
	Level 3-4 <input type="checkbox"/>		

GUEST:		Double Occupancy (Per person)	
Will not participate in any Essentrics activities.		\$1190.00 White Sands Hotel	<input type="checkbox"/>
		\$1125.00 Kantenah/Colonial Hotel	<input type="checkbox"/>

EXTRA NIGHT

Prices Per Night:

Single Occupancy	
\$270.00 White Sands Hotel	<input type="checkbox"/>
\$250.00 Kantenah/Colonial Hotel	<input type="checkbox"/>

Double Occupancy (Per person)	
\$180.00 White Sands Hotel	<input type="checkbox"/>
\$160.00 Kantenah/Colonial Hotel	<input type="checkbox"/>

Exact Dates of Extra Nights: _____

Total of Extra Nights: _____

TOTAL COST:

Participant # 1: \$ _____

Participant # 2: \$ _____

PAYMENT INFORMATION

PARTICIPANT #1 ONLY:

PARTICIPANT #1 AND #2:

Payment method: Visa MasterCard 2 Checks*

Bill me in: 1 installment OR 2 installments*

Credit Card #: _____ Expiration: _____

3 digit security code: _____ Full Name on the card: _____

Home Address: _____ City: _____

State/Prov: _____ Zip Code/ Postal code _____

Country: _____

Signature: _____

I hereby authorize the Esmonde Technique to charge the above credit card in the total amount of:

First Payment: \$ _____ Second Payment: \$ _____

PARTICIPANT #2:
If not paying with participant #1

Payment method: Visa MasterCard 2 Checks*

Bill me in: 1 installment OR 2 installments*

Credit Card #: _____ Expiration: _____

3 digit security code: _____ Full Name on the card: _____

Home Address: _____ City: _____

State/Prov: _____ Zip Code/ Postal code _____

Country: _____

Signature: _____

I hereby authorize the Esmonde Technique to charge the above credit card in the total amount of:

First Payment: \$ _____ Second Payment: \$ _____

*A deposit of half the amount owed will be charged upon receipt of the registration form. The remaining balance will be charged on **February 1st, 2018. Prices are in US dollars and include taxes.**

Cancellation Policy: You may cancel your reservation and receive a full refund (minus a \$150 admin fee) by latest **November 1st, 2017**. For cancellations after this date, a \$150 admin fee will be charged and you may incur other additional costs. Note: there will be no refund given for any cancellations after **February 1st, 2018**. If you have any questions/concerns, please email: maude@essentrics.com. You are responsible for booking your own flights and transportation from the airport to the hotel. There are airport taxis available (no reservation needed). In the very unlikely event that the event is cancelled, we will give a full refund of your event payment.

Photo/Videos: We will be taking photos and video during the Symposium. By signing this registration form, you are agreeing to allow us to use any photos or video that you may be a part of, for promotional or marketing purposes.

Disclaimer and other policies: I understand that I am participating in all classes entirely at my own risk and any loss, damage; injury or other mishaps will not be the responsibility of the class organizer or teacher. (If you are in doubt as to the suitability of the class to your medical condition, please consult your doctor.)

Signature participant #1: _____

Date: _____

Signature participant #2: _____

Date: _____