Gentle Dove Reiki

857 Main Street, Harleysville, PA 19438 Phone 267-416-6005

Mailing Address: P.O. Box 212, Schwenksville, PA 19473

Holy Fire Karuna Reiki® Class Registration Form

Name:	DOB:	
Address:		
City:	State:	ZIP:
Email:	Phone: _	
I certify that I have been performing att	cunements and are cor	mfortable doing so for the past 6 months
Usui Reiki Master Teacher		Year of certification
Email or Phone No. of Teacher		ication with this registration form.
Attach a copy of your Usui Reiki	Master/Teacher certif	ication with this registration form.
I am registering to attend the:		
Holy Fire Karuna Reiki		
Master Teacher Level Class		
Date of class:	<u></u>	
(if no class is scheduled, you will be notified via email when this class has been scheduled.)		
Please mail this completed form with a copy of the amount of \$250.00 (minimum non-refunda Schwenksville, PA 19473. Please note the dear receive a confirmation email from us when you	able deposit required) to dlines are listed on our v	Gentle Dove Reiki, P.O. Box 212, vebsite (<u>www.gentledovereiki.com</u>). You will
Once registered I fully understand that \$50.00 class. Any payments made over and above \$50 cancellation is received by us via regular mail of credited and may be used as credit to toward a	0.00 will be refunded wi or email (<u>info@gentledo</u>	thin 7 business days after notice of vereiki.com). However, the deposit can be
Signed by:		Date