Self-Care For The Empath Immersion

Please return with payment

**Please *PRINT CLEARLY*:**

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

With my signature I agree that I am solely responsible for participation as well as journeying to and from the workshop mentioned below. I agree that the organizer and the facilitator are not liable in any way.

I understand that no medical diagnosis or treatment will be administered in this workshop. No medical therapy will be undertaken or proposed. In case that I am, or was undergoing psychiatric treatment, or if I am seriously ill, I will talk to the participation of the Self Care For The Empath 4 Week Immersion over with my physician prior to enrolling.

**Class Venue:** Healing With Spirit/Cohasset Medical, 256 Hull St, Hingham, MA 02043, USA [www.laurahealingwithspirit.com](http://www.laurahealingwithspirit.com)

I agree with the rules and regulations.

**Attending (Check one)**:

□ Self Care For Empath, Sun, Jan 6th and Jan 13th 10am-4pm - $150.00

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount enclosed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Make check payable** to Laura Joseph and mail to Cohasset Medical, Att: Laura, 256 Hull St, Hingham, MA 02043.

**Cancellation Policy:** Classes are subject to change. A student’s failure to cancel with appropriate notice may result in loss of registration fee. If you know that you are unable to attend a class, please contact the office immediately to determine if your registration may be transferred to a future class of if you qualify for a partial refund.. Should the scheduled class not meet the minimum student requirement, we reserve the right to cancel the class and offer another future date to the students.

Appropriate notice is defined as written notice of inability to attend within seven days prior to scheduled class or workshop.