



REGISTRATION FORM

Name: _____ Best Phone Number to reach you at: _____

Name you like to be called : _____

Address: _____

email: _____ (this is the primary way we keep in touch with our students)

Is this how you would like your information to appear on the class roster? _____

Class(es) and date(s) registering for*:

ID / Level _____ City _____ Dates _____

ID / Level _____ City _____ Dates _____

ID / Level _____ City _____ Dates _____

ID / Level _____ City _____ Dates _____

*Class Prerequisites – I certify completion of the following (please initial):

_____ C1-500-hour massage certification or other professional training. Please specify here and include a copy of transcript or diploma.

_____ C2 – completion of C1 class

_____ C3 and/or C4 – completion of C1 and C2 classes

_____ C5 and/or C6 –completion of C1-C4

_____ C7 –completion of C1-C6

Hugh Milne C1-C7:	4-Day Class	Cost: \$695	Deposit: \$250	Balance: \$445
Review Classes:	1-Day Class	Cost: \$150	Deposit: \$50	Balance: \$100
VisionaryAnatomy:	3-Day Class	Cost: \$450	Deposit: \$150	Balance: \$300
Cranial Pediatrics I and II:	4-Day Class	Cost: \$600	Deposit: \$200	Balance: \$400
Visceral Manipulation I and II:	4-Day Class	Cost: \$600	Deposit: \$200	Balance: \$400
Beyond the Stillpoint:	4-Day Class	Cost: \$650	Deposit: \$250	Balance: \$400

Deposit is due with registration; balance due no later than 21 days before class starts and no refunds after 21 days. Confirmation and detailed class location, travel and accommodation information will be sent upon receipt of your registration. If you have any questions, please contact us.

Visionary Craniosacral Work™

P. O. Box 220 Big Sur CA 93920-0220 USA

Phone: 831-667-2323 Fax: 831-667-2525 email: infomilne@aol.com www.milneinstitute.com

Payment amount: \$ _____

: Check in US dollars drawn on US bank or US domestic money order (*made out to The Milne Institute*)

(Visa/MasterCard/Discover # _____ Exp. date ____ / ____

Name as it appears on the card _____

Cardholder's signature _____

Balance (21 days before class): on same credit card _____ Will send check _____

*** Registration Policy:** 1/3 of class fee is due upon registration, with balance due 21 days prior to the first day of class. Registrations cancelled with 21 or more days' notice will be refunded less a \$40 fee; *no refunds for any reason within 21 days before class.* We reserve the right to cancel classes not meeting minimum participant requirements by 21 days before the class. We strongly advise confirming with the organizer that the class has a minimum number of students registered before making nonrefundable travel reservations. If the class is cancelled for any reason by MII, all class fees paid will be refunded.

I have read and agree to these terms:

Signature

Date

**Please note that under California State law our classes are strictly avocational and are not eligible for vocational credit of any kind.*

**Please make checks out to "The Milne Institute Inc." not the teacher teaching the course-
thank you*

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