Lionheart West Institute of Transpersonal Energy Healing Registration Form

Lionheart West Institute of Transpersonal Energy Healing | PO Box 6061 # 700, Sherman Oaks, CA 91413 | (818)-640-6444 | Fax (818) 728-0811 | lionheartwest@lionheartinstitute.com

Name	Date
Address	
Home Phone	Work Phone
Email	Cell phone
Occupation	
Relationship Status	
How did you hear about this course?	
Reason for taking this course	
Describe your current state of health and stress level	
Any physical or emotional limitations?	

Course Title (prerequisites may be required for your course)	**Start Date**	**Fee**	**Total**
Orientation (informational meeting)		FREE	
check one: ___Personal Journey ___Professional Training ___ Continuing Education		**Total:**	

Payment information:

Payment Method *(circle one)* Check Credit Card

Credit Card # 3 digit security code Expiration Date:

Print name on credit card

Signature

Payment Enclosed: $

Acceptance into Lioheart courses not guaranteed. Certain prerequisites and the discretion of the instructor apply. Please consult the course description in the catalog or on the Lioneheart Website. Www.lionheartinstitute.com

make check payable and mail to : LIONHEART INSTITUTE WEST
PO Box 6061, # 700
Sherman Oaks CA 91413