

Workshop Registration

Your name: _____

Address: _____

Phone number: _____

Email address: _____

Please select the workshop you are registering for:

Basics:

Introduction to Shamanism and Shamanic Journeying Date: _____ \$40

Essentials (Introduction to Journeying is required):

Healing our Ancestral Lines Date: _____ \$120

The Shamanic World Tree (4-part series) Date: _____ \$460

The Shamanic World Tree with horses Date: _____ \$780

Extras (no pre-requisites):

Drum Birthing (non-refundable down-payment \$150) Date: _____ \$300

Rattle Birthing (non-refundable down-payment \$60) Date: _____ \$180

Walkabout Vision Questing Date: _____ \$100

Vision Board Date: _____ \$100

Immersion (Basics and Essentials are required):

Shamanic Dreamwork Date: _____ \$180

Shamanic Shadow Work Date: _____ \$180

How do you wish to pay?

Interac eTransfer to ulrike@kaleidoscopehealing.com, security password: _____

PayPal (+3%) <https://www.paypal.me/KaleidoscopeHealing>, transaction ID _____

Cheque to: Ulrike Spitzer
P.O. Box 555
Hope, BC V0X 1L0

Please return this form to ulrike@kaleidoscopehealing.com or mail it together with your cheque.