



WHOLE PRESENCE
GLOBAL

Registration Form

Quantum Soul Healing Practitioner Certification (June 17-18, 2022)
Soul Solstice Celebration (June 20-21, 2022)

Your Legal Name: _____

Name to be listed on Certificate: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Country: _____ Phone: _____

Email: _____ Date of Birth : _____

Emergency Contact Person & Phone Number:

FOOD SENSITIVITY CONSIDERATIONS:

Vegetarian lunch and refreshments will be provided daily for each event.

We will do our best to accommodate any food sensitivities or allergies. Please briefly describe any requests:
(Gluten Free, Dairy Free, Vegan etc.)

Yes, I'd like to attend the Whole Presence Global Training or Event: (Check one or both)

\$555 - Quantum Soul Healing Practitioner Certification

(Friday, June 17 & Saturday, 18, 2022)

\$333- Soul Solstice Celebration (Monday, June 20 & Tuesday, June 21,2022)

PAYMENT / DEPOSIT INSTRUCTIONS: Full payment is due on or before **Sunday, June 12th**

I am sending a check for payment. Payable to: El Herington, PO Box 1607, Kapaa, HI 96746, USA

I request a Square Invoice. There is tax included and a 4% card processing fee.

Please charge Credit Card # _____ Amount:\$ _____

Expiration Date: ___/___ CV Code: _____ Zip Code associated with Account: _____

*Please note that credit card usage incurs an additional 10% fee for HI tax and card processing.



Registration Form

REGISTRATION INSTRUCTIONS:

- (1) Full payment is required upon registration to hold your place. See cancellation policy below.
- (2) Email your completed registration form to Jenn Walch: Jennifer.l.walch@gmail.com
- (3) **BALANCES:** Full Payment is due before **Sunday, June 12th, 2022.**

CANCELLATION POLICY: Because of the closeness of the event dates, **any cancellation** made between the registration date and the program start will result in a total loss of the funds paid. Any cancellation made after the program begins will result in total loss of funds. Trip cancellation insurance is always recommended.

WAIVER: I agree to take full responsibility for all the blessings and challenges that can happen during an intensive Training program or Event. I agree to release El Herington, Whole Presence Global, Spirit of Kauai and Ama Council Group, from all responsibility and liability for unforeseen circumstances and/or changes in the schedule due to acts of God (weather, earthquakes, etc.), acts of terrorism and political unrest and any other unforeseen events or mental/physical illnesses occurring during Training dates. I understand that El Herington, Whole Presence Global, Spirit of Kauai and Ama Council Group, reserve the right to ask a group member to leave the program if their behavior is harmful, disruptive or dangerous to the group. I agree to take responsibility for the effects of this Training or Event on my emotional and physical life and acknowledge that the Training Leader is not responsible for any life challenges and/or mental distress resulting from the Training or Event teachings and experiences. I understand that I am aware of and agree to the REGISTRATION, PAYMENT and CANCELLATION POLICIES and understand and agree to all of the above information.

With this registration, I am agreeing to participate fully with the content and activities of the program. I agree to attend all days and times for the full program. I understand and agree that Practitioner Certification is dependent on completing the full Training and final exam requirements.

() I have read, understood and agree to the registration and cancellation policies.

Signature: _____ Date: _____