

# Registration Form

To Register post form with Payment/Paypal Receipt as per below\*



## 'Dreams and Symbols'

Facilitated by Cheryl Rae

1 day course:

### Personal Details

Title:

First Name:  Last Name:

Address for Mailing:

Phone (Home):  (Business):

Mobile Phone:

Email Address:

**NB:** *Email address is confidential and will not be given to any third party but please indicate if you would like to be on my own mailing list.* Yes / No

### Payment Details

Payment Amount: \$140.00 Full Price  
\$130.00 Early Bird  
\$120.00 Concession

Payment option:  Cash  Cheque  Paypal  Money Order

Send registration form and cheque

or paypal confirmation number  by post to:

\*Postal Address: Cheryl Rae  
9 Moreland Avenue  
Mitchell Park SA 5043

For Further Enquiries contact Cheryl - 08 8277 1792 or [cherylrae@aapt.net.au](mailto:cherylrae@aapt.net.au)