



## Registration Education Training “Energetic Osteopathy”

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone, Fax, Email:** \_\_\_\_\_

Hereby I bindingly register myself for the education training  
**Energetic Osteopathy**

**Seminar:** \_\_\_\_\_

**Date of Seminar:** \_\_\_\_\_

**Place of Seminar:** \_\_\_\_\_

Course instructor: Kalu E. Schreiber D.O.

The seminar fees amount to:

- 9 – day education training: 2800,00 €
- For participants repeating: 100,00 € a day
- Introduction seminar: 590,00 €
- EO for midwives and doulas: 590,00 €

I am aware that the participation in the seminar is only possibly upon advance payment.

A deposit of 500,00 € is payable via bank transfer after the registration form has been received. The issuing of an invoice occurs after registration. The remaining amount is due

- no later than 3 days before commencement of the education course.
- or
- in..... monthly instalments of ....., - € with the first payment on..... .

In case of cancellation of participation prior to one month before the commencement of the training course a handling fee of 50.00 € becomes due. In case of cancellation of participation within the month leading up to the seminar the whole deposit will be withheld. In case of discontinuation of the education training the complete fee is payable nevertheless. I am participating under my own responsibility.

I hereby agree for my phone number to be passed on to other seminar participants for the purpose of carpooling.

\_\_\_\_\_  
Place, Date

\_\_\_\_\_  
Signature