



LifeStream Advanced (IPI) Seminar Registration

Please register me for the LifeStream Advanced (IPI) Seminar on _____

Last Name _____ First Name _____

Name you like to be called _____ Date of birth _____

Mailing Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

Email _____

Occupation _____ Employer _____

Sponsor (Person who shared LifeStream with you) _____

The intent of this seminar is to be a beneficial growth experience. Please describe any medical or psychological conditions of which the facilitator should be aware:

What improvements in your life do you intend to produce from taking this class? _____

LifeStream Advanced (IPI) Seminar Adult Tuition is \$1,050, which includes a non-refundable \$200 registration fee.

Payment amount included with this application: \$ _____ Balance due: \$ _____

Balance is due one week prior to the start of the class.

Please make checks payable and send to: LifeStream Rochester, 19 Great Wood Court, Fairport NY 14450. PayPal payments (including credit cards tied to PayPal) go to Holly@LifeStreamRochester.com. Any questions? You can call Beth at (585) 329-2640 or E-mail her at bdewey@mindspring.com.

Signature _____ Date _____