



Claerwen Retreat

School for Initiatic Therapy

Application Form

Title of Workshop:

Your Name:

Street:

Town & Postcode:

Phone:

Email:

Date of Birth:

1. What is your professional background and present occupation?

2. What is your motivation for this course?

3. One weekend workshop fee is included as a deposit. Amount:

4. Four types of accommodation are available. All linen and towels are supplied.

Please tick your preference. Cost per night:

- | | | |
|--------------------------|-----------------------------------|----------|
| <input type="checkbox"/> | In the loft in the workshop area | \$27.50 |
| <input type="checkbox"/> | Twin shared room in a cottage | \$60.00 |
| <input type="checkbox"/> | Single in a cottage | \$90.00 |
| <input type="checkbox"/> | Single in a self-contained studio | \$132.00 |

5. Send application form to your course facilitator.

- Cornelia Elbrecht: 480 Tuxion Road - Apollo Bay VIC 3233;
cornelia_elbrecht@clawen.com.au
- Lindsay Childs: PO Box 23 - Port Elliot SA 5212;
lindsaychilds@internode.on.net
- Sarah Aley: Unit 2, 4 Gellibrand Street - Williamstown VIC 3016;
sarah@jinshindo.com.au
- Louise Fairney: P.O.Box 250 - Apollo Bay 3233;
louanna16@hotmail.com