

EarthDancer Wellness  
Registration Form

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

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

City/State/Zip \_\_\_\_\_

Day/Evening/Cell Phones: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Class/Workshop Title: \_\_\_\_\_

Class date(s): \_\_\_\_\_

Location: \_\_\_\_\_

YES or NO (please circle one) It is okay to list my above information on the class roster and provide to class participants for carpooling purposes.

Amount Included

Class fee total : \$ \_\_\_\_\_

Non-refundable Deposit: \$ \_\_\_\_\_

Balance Due\*\*: \$ \_\_\_\_\_

Mail this form, check or money order\* to:

Samantha Ford, CMT, RMT, CHCT  
PO Box 6684  
Albany, CA 94706

\* OR mail in your registration form & pay via Pay Pal:

Go to Pay Pal and pay to email address:

[earthdancer@earthdancermassage.com](mailto:earthdancer@earthdancermassage.com)

\*\*Please add a 3.5% Pay Pal fee to the total if you pay via Pay Pal