

# Self-Awareness Weekend Counseling Program Registration Form

## Personal Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Best time to call: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Email: \_\_\_\_\_  
Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_ Referred By: \_\_\_\_\_

## Registration Information

Today's Date (mm/dd/yy): \_\_\_\_\_ Your Self-Awareness Weekend Date (mm/dd/yy): \_\_\_\_\_  
To register, you may email this form to [alambert@12promises.com](mailto:alambert@12promises.com), or send this form to the address below along with a non-refundable deposit of \$200 (or payment in full) to secure your place. Please make checks payable to: **Self-Awareness Institute**.

D Credit Card (select type: Visa ) \_\_\_\_\_ Check (check number: \_\_\_\_\_ )  
Credit Card Number: \_\_\_\_\_  
Exp. Date (mm/yy): \_\_\_\_\_  
Name on Card: \_\_\_\_\_

Program Cost:

Savings: Deduct \$55 if paying in full at least two weeks in advance \$1250.00

Total Amount Due:

Amount Paid with Registration (minimum \$200 deposit):

Balance Due:

## Contact Information

Send To:  
**Self-Awareness Institute**  
**5777 Madison Ave., Suite 307**  
**Sacramento, CA 95841**

Questions? Call (916) 966-0411  
Or toll free (866) 204-6384

Cancellation Policy:  
Any cancellation received with at least one week notice before the Weekend gives you the following options:  
1) Receive a refund of your payment less the \$200 non-refundable fee, or  
2) Apply the amount paid to a future Weekend taken within one year.  
No credit or refund is available if you fail to give proper notice, if you do not show up, or if you leave the Weekend early.

Please be sure and read carefully the General Information and Reminder List and send your completed questionnaires either by email ([alambert@12promises.com](mailto:alambert@12promises.com)) or postal mail to the address above, by the Tuesday before your Self-Awareness Weekend Counseling Program.

All funds I pay to Self Awareness Institute hereunder constitute an even-value exchange for my participation in any program(s) for which I am now registering, and are held by the Self Awareness Institute as hereditaments with right of perpetual succession, no part of which ever inures to the benefit of any "individual" as defined in or to any "organization" created under secular law. This means the funds are held by a private ministry, to be used to support constructive works in the world. Self Awareness Institute, the full name of which is The Presiding Overseer of the Congregation of Self Awareness Institute and His/Her Successors, a corporation sole, is a private, eleemosynary, ecclesiastical corporation sole, a sovereign titular office as well established in the common law and not a juris ficta entity.

I have read, understand, and agree to the statements above:

(Seal): \_\_\_\_\_ Date: \_\_\_\_\_