

Registration form (print out and send in)

Hereby I register for the following consultations:

Primal Self-Awareness Weekend – Practice Heidelberg-Ziegelhausen, Kleingemünder Str. 11, 230,- €, deposit 80,- € (enter exact date):

.....

Individual Intensive - Practice Mannheim, Friedrich-Ebert-Str. 49
1.350,- €, deposit 450,- € (enter exact date):

.....

Other consultations:.....
A third of the price is to be sent in as deposit in advance. Enter exact dates:

.....

I want to make a request for the social price (2/3 of the regular price) and ask for your return.

My deposit will be made with this registration to
IBAN DE15 2009 0500 0107 8759 91, BIC GENODEF1S15

the remaining amount will be payed one week prior to the event
or brought in cash.

Name:

Birthday:

Address:

.....

.....

Phone:

email:

I am attending primal sessions, so I confirm having read „The Primal
Scream“ or I will read it until my stay.

I am attending conventional sessions.

Location, date, signature:

Recipient:

Integrative Primärtherapie Carmen Reiss
Praxis Friedrich-Ebert-Str. 49

info@primal-ma.de

D - 68167 Mannheim

Fax: +49 621 33 61 87-8