

In-Spiraling Movement Arts

Formerly White Crane Movement Arts

2001 S. Barrington Avenue Ste#112 Los Angeles, CA 90025

PH (310) 235-2100 Fax 310) 235-2117

info@in-spiraling.com lisamarie@in-spiraling.com www.in-spiraling.com

Registration Form

Name of Course: _____

Date of Course: _____

Affiliation: _____

Pre-Trainer/Master Trainer: _____

Level 1 Cert Update: N/A _____ or Date _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: Day- _____ Evening- _____

E-mail: _____

Please make all checks payable to “In-Spiraling Movement Arts”

I have enclosed my **deposit or full payment** of _____ to reserve my place in the above course. I understand that all deposits are non-refundable and non-transferable and that the balance is due on the first day of the course. I understand that no video or recording equipment is allowed and that courses may be cancelled due to lack of confirmed participants. I understand that my signature below is required to hold my place in this course.

Signature: _____ Date: _____

Cancellation of courses is contingent upon confirmation of not less than 6 candidates in which deposits will be refunded.

Please contact us if you have any questions.