

2010 Northwest Reiki Gathering Master Time Registration

Name _____ Male _____ Female _____

Address _____

City _____ State _____ Zip _____ Country _____

Phone (Home) _____ (Work) _____

(Mobile) _____ E-mail _____

**Okay to contact me by way of my email address – to send Gathering info, confirmation, and/or group photos. Yes _____ No _____*

What is your age range (circle one): 16 & under | 17-32 | 33-45 | 46-64 | 65 & over

Cabin/Bed assignment info:

Preferred Roommate(s) _____

Relationship _____

Health issues that need accommodation _____

(Please register by July 1 and we will do our best!)

Special diet needs? No wheat _____ No dairy _____ Other (be specific) _____

(Advisory: Breitenbush is not currently able to provide a diabetic diet. There is limited refrigeration available if you need to supplement the vegetarian menu.)

*I am a Reiki Master _____. This is my first time at the Gathering _____.

*I will be attending Master Time only _____.

*I will be attending both Master Time and the weekend _____.

*I will bring _____ Reiki tables.

*Please send me a scholarship application _____. *(For weekend gathering only)*

*I will need to rent bedding at Breitenbush. *(Add \$20/\$25 below)* _____.

*I need transportation _____. I can provide a ride for _____ people.

*I am interested in selling a handcrafted Reiki item at the Marketplace _____.

*I am interested in volunteering at the Gathering _____. Specifically, I would be willing to do: Cabin blessings _____ BB Staff Reiki _____ Room angel _____
Parking lot greeter _____ Other (specify): _____

*I am a LMT (in WA or OR) and would like a Certificate for Continuing Education

Credit _____ License # _____

*If you wish to stay at Breitenbush the day before or after the event, you must make your own arrangements with the Breitenbush staff at 503-854-3314. NOTE: To facilitate cabin assignments, please let us know if you **do** register with Breitenbush. We will try to avoid moving you if at all possible!*

Payment: Personal check # _____ Amount \$ _____

or Credit Card # _____ Exp. Date _____

Authorized Signature _____ Amount \$ _____

Master Time only: \$285 (\$280 if paying by check.)

Weekend: 4/7 & Before: \$325 (\$315 if paying by check.) After 4/7: \$367 (\$356 check).

Both: 4/7 & Before: \$610 (\$595 if paying by check) After 4/7: \$652 (\$636 check).

Bedding: \$20 individual, \$25 couple

Mail checks (payable to NWRG) to:

Arlene Angell, Registrar

P.O. Box 1078, Ravensdale WA 98051

Questions? Contact Arlene at 425-432-5850 or registrar@nwreikigathering.com