

"Infant Massage ... Communicating Love through Touch"

Name: _____

Address: _____

City: _____ State: _____ Postcode: _____

Phone: _____ Email: _____

A short note explaining your interest in this workshop:

Professional background:

Please enroll me for the workshop in:

Contact: Clare Thorp 03 9728 8667 clarethorp@bigpond.com

- Melbourne 2nd, 9th & 23rd May, 6th June 2010 Sydney 15 & 16 May, 26th & 27th June 2009
- Melbourne 24th & 25th July, 4th & 5th September 2010
- Melbourne 11 – 14th November 2010

Fees:

- Deposit \$100 to secure your place (non refundable)
- Early Bird \$895 (required 6 weeks prior to the workshop, includes free gifts (see practitioner workshop webpage for details))
- Full Payment \$895 (required 2 weeks prior to workshop)

Payment method:

Cheque or Money Order should be made payable to **Clare Thorp**.

Send to:

Clare Thorp
P.O. Box 288,
Fairfield, VIC 3078

Please contact Clare Thorp if you wish to pay by electronic transfer.

I understand that the class may be cancelled due to insufficient enrollment.
If that occurs I understand that my registration fee will be refunded in full.

I cannot attend, but am interested in future training **YES**

For more information please contact: CLARE THORP

TEL: (03) 9728 8667

P.O. BOX 288 Fairfield VIC 3078

email: clarethorp@bigpond.com