



MATRIX INSTITUTE
Expanding the Horizons of Well-being

REGISTRANT NAME		
ADDRESS		
		Zip/PC
PHONE NUMBERS		
EMAIL		

Please complete this form and submit it to the Matrix Institute or FAX to: 905-726-8575

SEMINAR, LOCATION, DATE	TOTAL PRICE
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<p>MATRIX REPATTERNING ADVANCED TRAINING PROGRAM* AURORA CAMPUS, FALL, WINTER 2011, 2012 MODULES A, B, C, D</p>	<p><input type="checkbox"/> \$1,697.00** PER MODULE</p> <p><input type="checkbox"/> MODULES A-D: PREPAID: \$6,497.00</p> <p><input type="checkbox"/> Early Registration : \$5497.00 – paid by September 6, 2011</p>
<p>MATRIX REPATTERNING CERTIFICATION PROGRAM* AURORA CAMPUS, FALL, WINTER 2011, 2012</p>	<p><input type="checkbox"/> CERTIFICATION MODULES E, F, G: \$4997.00** PER MODULE</p> <p><input type="checkbox"/> COMPLETE CERTIFICATION PROGRAM MODULES A-G PREPAID: \$10,500.00</p> <p><input type="checkbox"/> Early Registration: \$8997.00 - paid by September 6, 2011</p>

*Eligibility for Certification in Matrix Repatterning requires successful completion of the Advanced Training Program and fulfillment of all other Certification Requirements as set forth by the Matrix Institute.

**All fees include HST

PAYMENT OPTIONS (STAFF TO FILL IN)

PAYMENT	TOTAL AMOUNT \$ _____	DATE _____
<input type="checkbox"/> CREDIT CARD	<input type="checkbox"/> CHECK	<input type="checkbox"/> MONEY ORDER
		<input type="checkbox"/> TRAVELLER'S CHECK
		<input type="checkbox"/> CASH

CREDIT CARD M/C VISA AMEX	CARD #: _____	EXPIRY: _____
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Cancellation and Refund Policy:

Notice is required for all training program cancellations. All cancellations will be subject to a charge of 15% of the original course fee unless requested within 5 business days of enrollment

I agree to the terms of payment listed above.	_____
	SIGNATURE