

Voices of Spirit
www.voicesofspirit.com

Registration Form for Events and Classes
(831)247-3265
HeatherHouston@voicesofspirit.com

Event Title _____

Dates and Times _____

Location _____

Name _____

Address _____

City _____ **State** _____ **Zip** _____

Phone _____ **Cell** _____

E-mail _____

Amount Enclosed _____

Balance (if applicable) _____

**No one will be turned away for lack of funds. Options are available.
Half of the fee is non-refundable, and may be applied towards another series or
private sessions.**

**Make your check payable to *Voices of Spirit* and Mail your registration form and
check to:**

Voices of Spirit
P.O. Box 1157
Santa Cruz, CA 95061