

Desert Wind Healing Arts Class Registration (Classes scheduled after 9/1/08)

Class _____ Dates _____ Price _____

Name _____

Address _____

Web site _____

Email _____

Phone _____

Total:

Method of Payment

Check	
Cash	
Credit Card - Visa/MasterCard/Discover	

Credit Card number _____ Exp. Date _____

Signature _____

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