

Eden Energy Medicine Certification Regional Entry Program

REGISTRATION FORM

Lisa Buford, Instructor
Faculty Member of Eden Energy Medicine Certification Program
Sue Shaffer, Sponsor and Contact
sue@alchemywithin.com (630)306-9156

2010/2011:

July 15 – 18, 2010
Sept 16 - 19, 2010
November 18 – 21, 2010
January 13 – 16, 2011

Name _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Email _____

How did you hear about the program? _____

Profession _____

A student roster will be available with Name, Phone & Email: Do Not Include Me

To register, complete the registration form and send \$300 (will be applied to class 4) non-refundable deposit before May 15th to reserve your space. Full payment of \$995 for the first class is due by June 3. Please make checks to Lisa Buford, c/o Susan Shaffer, 212 University Drive, Mount Prospect, IL 60056.

TRACK OPTIONS (Please select one track)

- Eden Energy Medicine Certification Program: Wellness Track
 Eden Energy Medicine Certification Program: Certification Track
 I would like to audit the following classes: 1 2 3 4

Prerequisites

Option A: Attend an Eden Energy Medicine 5-Day Basic Training.

*Option B: 1) Attend a *live* class taught by Donna Eden and David Feinstein, Ph.D , **plus**
2) Complete and pass the online exam (\$52) based on the Eden Energy Medicine 5-Day Basic Training DVD set .

*Option C: 1) Attend an *EM 101-104 class taught by an authorized EEMCP faculty member, **plus**
2) Complete and pass the online exam (\$52) based on the Eden Energy Medicine 5-Day Basic Training DVD set .

Note: Reading the *Energy Medicine* book is required reading for any option

- *Taking a live class taught by Donna or an EM 101-104 class needs to be completed before starting year Two in Phoenix. **Lisa will offer one EM 101-104 Class if needed to satisfy this requirement.**

PROGRAM COSTS

Tuition Cost and Payment Options:

Total Tuition \$3,980

The student understands that this enrollment is for a one-year program divided into four quarters with Classes 1 through 4 beginning June 3, 2010, August 31, 2010, October 31, 2010 and December 31, 2010, respectively.

\$300 non-refundable deposit sent in with the registration is required to enroll. This \$300 will be applied to class 4.

\$995 due June 3 for class one

\$995 due Aug 31 for class 2

\$995 due Oct 31 for class 3

\$695 due Dec 31 for class 4

\$497.50 for each class audited by CP Graduates

Check Enclosed, payable to Lisa Buford: Check #: _____

Class 1 Balance Due by June 3, 2010

Amount of Deposit paid toward Class 1: \$ _____

Meals: Snacks, tea and coffee will be available. Lunch and dinner are on your own. A list of local restaurants will be provided.

Accommodations: Hotel suggestions will be made upon request.

Class Schedule: All classes are held Thursday, 6 pm through 9 pm; Friday & Saturday 9 am to 6 pm; and Sunday 9 am to 5 pm. Classes must be taken in order.

Signature: _____ Date: _____

I understand that by registering for the REP-Chicago Area, I am agreeing to attend the entire one-year program and will pay for it according to the withdrawal policy on the last page of this form.

I also understand that I must adhere to all the Innersource prerequisites and send Lisa Buford the \$300 non-refundable Registration fee to be applied to Class 4.

By my signature I affirm that I have read and agree to the Eden Energy Medicine Regional Entry Program forms: Chicago Area Program description associated with this registration form **as well as the withdrawal policy and release agreement included with this form.**

Please mail to:

Susan Shaffer
212 University Drive
Mount Prospect, IL 60056

Eden Energy Medicine
Regional Entry Program: Chicago Area Withdrawal Policy

Prior to Class 1:

Students who withdraw from the program before 60 days prior to the start of Class 1 will receive a full refund, less a \$300 administrative fee. For withdrawals between 30 and 60 days prior to the start of Class 1, all but \$500 will be refunded. There will be a 50% refund for any payment over the \$300 non-refundable deposit for students withdrawing less than 30 days prior to the start of Class 1 due to limited space and other commitments we have to make well in advance in planning such events. Payment for the first class is due on [June 3, 2010](#).

It is the students' responsibility to make up any work and instruction they miss if they fail to attend any of the four classes in this Regional Entry Program. **If a class is missed, the student still pays the full tuition for that class, plus there is an additional fee of \$75 for the handouts and Phoenix Certification DVD's. OR...The student can make up the REP class with another REP teacher.**

For withdrawals that occur from Class 2 forward:

If you withdraw from the program within thirty days before the start of class 2, you will receive a 50% refund on any monies you have paid toward that particular class and a 100% of money for classes thereafter. If you just miss a class, but intend on completing the one-year program, you are still responsible for the full tuition for the class missed. Your tuition will still give you access to the instructor for questions on the material as well as handouts and continued participation in the Eden Energy Medicine Certification Program.

Withdrawals must be received in writing or by e-mail sue@alchemywithin.com and will be promptly acknowledged once received. In the case of emergencies (death or injury) or catastrophic (natural or accidental) events, you may contact Sue Shaffer to discuss your options.

REGIONAL ENTRY PROGRAM RELEASE AGREEMENT

I understand that Energy Medicine is an innovative approach to health care, which is only beginning to be investigated scientifically. I further understand that the training in Energy Medicine and other services I am or may be receiving from Innersource or [Lisa Buford](#) do not substitute for diagnosis and/or treatment from a qualified health practitioner for illnesses, injuries, or other medical conditions.

I understand that some classes are videotaped, that these tapes may be distributed for educational purposes, and I give my permission for my participation to appear on these tapes.

Innersource reserves the right, at its discretion and without explanation, to ask a student to leave an Eden Energy Medicine Certification Program class, to terminate a student from the EEM Certification Program, or to not graduate a student from the EEM

Certification Program based on failure to meet the academic, behavioral, professional, or ethical standards of the program as determined by Innersource staff. Any refunds will be fairly determined, again at the discretion of Innersource staff, on a case-by-case basis.

I also understand that any activity in which a person might participate involves some risk. In consideration of being permitted to enroll for the instructional and other services offered through Innersource, I release and hold Innersource, its agents, officers, employees, directors, successors, and affiliated corporations harmless from any claims arising out of my participation in the instructional or other services offered by Innersource or the use of facilities and/or equipment it provides.

Signature_____ Date_____