

Individual Certification Class Registration Form



In cooperation with the Embassy of Life Mastery, the Naturopathic Institute is able to offer a certification program. Please use this form to enroll in the individual class you will be taking to complete a certification. Students wishing to take classes for personal enrichment, or to meet CEU requirements, please use the Alumni/Guest Class Registration Form. An Emphasis Certification Enrollment Agreement Form must be on file before you will be eligible to register for this class.

(Please print clearly.)			
First Name:	Last Name	e:	
Street Address:			
City:		ST:	Zip:
Phone: ()	Email:		
Certification Department:			
Advanced BodyworkAdvanced Naturopathic SHerbologyHomesteading		Advanced EnergFood RevolutionHolistic Family NSelf-HealingVibrational Med	Medicine
Course Name:			
Course Date(s):			
Tuition Amount Due:	Core Class: \$633	E	mphasis Class: \$175
Payment must be received at		_	ed in this class at least
	10 days before the cla		
Housing Accommodation: If yo cost is \$45 per night (non-refundable). Pay class. No call, no show will result in a \$45 per night. Yes, I will need overnight. Please add my accommodation: I will pay for my a	ment for housing accom er night charge. housing accommodati commodation fee to m	modations can be mad ons for these dates:_ y payment now.	de now, or when you attend the
No, I will not need housir			
Form of Payment:			
Amount Due: Tuition:	+ Housing	= Total Amount D	IIIE.
Method of Payment:CashC			
Card #			
	ler Name:		
Card Holder Signature:			