



**Awakening your Psychic & Medical Intuitive Skills
Intuitive Seminar Training Programs**

Registration:

Please fill out this form and mail to address below with payment by either check, or credit card
Please call Nirup or Wanda at the Sedona Sacred Light Institute, 928-202-0973, with your
registration questions or to take your credit card information directly over the phone.

Mail your enrollment form to:
**Sedona Sacred Light Institute
PO Box 4234
Sedona, AZ 86340**

Name: _____
Mailing address: _____
City _____ State _____ Zip _____
Home phone :(_____) _____
Day phone: (_____) _____
E-mail _____
Date of birth _____ Age _____

Please make all checks and money orders out to: Nirup Barnum

Please check the Intuitive Seminar Training Program Level you will be attending:

- Certification Course – Level 1: Date: _____ Location: _____
- Certification Course – Level 2: Date: _____ Location: _____
- Certification Course – Level 3: Date: _____ Location: _____
- Certification Course – Level 4: Date: _____ Location: _____

Register 30 days early for the discounted rate: _____

Full rate: _____ (see dates on web page)

Credit Card Information:

Name on card: _____
Billing Address _____
Credit Card No _____
Expiry Date _____
Security Code back of card (Visa, MC, Discover - last 3 digits) _____
Front of card (Amex – 4 digits) _____

Please check if you have knowledge or training in any of the following:

Energy Therapy Beginning Psychology Beginning Physiology Psychic Abilities
 Meditation Beginning Anatomy Chakra and Aura Scanning Massage Therapy

Please check next to your highest level of education:

High School Technical School College

Please describe any other training you have had that is not listed:

Please give a brief description of why you wish to attend this intensive and what you expect to receive from it:

**SEDONA SACRED LIGHT INSTITUTE RELEASE FORM
PARTICIPANT ACKNOWLEDGEMENT AND ASSUMPTION OF RISKS AND
RELEASE AND IDEMNITY AGREEMENT**

As an enrollee, participant and student of SEDONA SACRED LIGHT INSTITUTE, from now on referred as SSLI, I understand, acknowledge and agree that I am responsible and assume all risks in engaging in all of my activity in receiving instruction, education, adventures, outings, hikes, and meditations while attending SSLI Intuitive Training Seminars.

I also assume all responsibility and risks of my person, body, decisions, physical condition, mental health, emotional health, medical treatment, death, injury, illness, personal property, or disability at all times while attending SSLI Intuitive Training Seminars.

All activities I participate in may take place in United States or a foreign country and they be planned or unplanned, supervised or unsupervised and I acknowledge I am eighteen years of age or older. I agree the SSLI Intuitive Training Seminars may be modified for any number of reasons including convenience, emergencies, instructor's decision and unexpected conditions and I agree to flow with those modifications.

I assume all responsibility and risks, hazards and dangers for my person and activities while attending SSLI Intuitive Training Seminars whether inherent or not or whether described above or not. I release SSLI from, and agree not to pursue claim or sue SSLI for any liability, claim, suit or expense in any way associated with my enrollment or participation or use of any equipment, facilities, tools, toys, etc... in SSLI Intuitive Training Seminars.

Neither I nor anyone acting on my behalf will make a claim against SSLI for any loss, injury, illness, personal damage, mental or emotional trauma or death suffered by me. This release includes any losses caused or alleged to be caused in whole or in part by the neglect of SSLI or its teachers, instructors, staff or volunteers to the fullest extent allowed by the law and includes claims for breach of contract or any type of suit. I do not wavier any claims for gross neglect or willful or wanton conduct.

I further agree to defend and indemnify SSLI to pay or reimburse SSLI for money it is required to pay, including attorney fees and costs, with respect to any and all claims brought by or on behalf of me, act or omissions, use of equipment or facilities, including claims that SSLI instructors, teachers, staff, volunteers for negligence. I do not agree to indemnify SSLI for clams of gross negligence or willful or wanton conduct.

I agree that the substantive law of Arizona governs this document and any dispute, claim or suit I have with SSLI, regardless of the conflict rules, any mediation, suit or other proceeding must be filed or entered into only in Arizona. I agree to pay all attorney fees and costs incurred by SSLI in defending a claim or suit if the claim or suit is withdrawn to the extent a court determines that SSLI is not liable for any injury, damage or loss.

This assumption of risk, release, indemnity agreement, and all other provisions in this document are intended to be interpreted and enforced to the fullest extend allowed by law. Any portion of this document deemed unlawful or unenforceable is severely and shall be stricken without any effect on the enforceability of the remaining provisions, what shall confirm in full force and effect.

SSLI has full permission to use my photo, image, video, DVD, image retrieval system for sale or reproduction in any manner it desires, including advertising, display, video, DVD, training manual, etc...SSLI reserves the right to remove any participant from the program when teacher, instructor, staff or volunteer believes with their discretion the participant or student is acting in any manner detrimental to the seminar. If participant or student is dismissed or leaves or departs for any reason, he or she will be responsible for all costs. I agree to all aforementioned above and will abide accordingly.

Signature

Date

Printed Signature

Date