

**WORKSHOP REGISTRATION FORM**

Please type or print clearly and mail this page only to the address below with your deposit.

**INTRODUCTION TO INKA MYSTICISM - WORKSHOP**

Workshop Information:

**Introduction to Inka Spirituality Workshop**

**Date:** \_\_\_\_\_

**Location:** \_\_\_\_\_

Your information:

NAME \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

\_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE ( ) \_\_\_\_\_ (h.) ( ) \_\_\_\_\_ (o.) ( ) \_\_\_\_\_ (cell)

( ) \_\_\_\_\_ (fax) E-MAIL ADDRESS \_\_\_\_\_

Workshop Fee: \$ 45.00

Please make checks payable to Inka Wisdom and mail it with this form to:

P.O. Box 231354  
Centreville, VA 20120