

**REIKI LEVEL 1 TRAINING REGISTRATION FORM**

**Date:**

**Name / Surname: Date of Birth:**

**Address:**

**Phone:**

**Email:**

**Dates:** Dates to agreed with the student and **an optional assistance to one** of the next 3 monthly Reiki Gatherings to do more practice.

**Venue:** Amber Gift Shop St. Mary’s 18, Galway / Shelley’s Health and Beauty Clinic
**Investment:** 240€

**To Book,** please fill the registration form and send the 100€ deposit receipt to secure your place. The rest of the amount (140€) needs to be paid before to start the first day of the course.

**Note:** Please, due to the amount of applications I receive Students may need to put their names on the bank payment so the payment can be recognised. Thank you.

**Bank details:**

**Eva Llado Medina**

**AIB BANK**

**BIC** AIBKIE2D

**IBAN** IE58AIBK93709650625183

\* Deposits are Non Refundable unless the Workshop is cancelled by Eva Lulavae, Personal Growth and Self-Development. Filling this form I authorize Eva Lulavae to store and manage my personal data.