



Registration Form- ITALY 2020

Name _____

Address _____

Email _____

Phone # _____

Please check accommodation: Standard, Superior, Superior Deluxe, Junior Suite

SGL - _____

DBL - _____

* If selecting anything other than SGL, please provide room share information –

7 nights accommodations, Airport TSF, Breakfast, Daily Yoga, All scheduled excursions.

Payment:

A non-refundable deposit of \$500 is required to hold your space- final balance due 90 days prior to departure (February 16, 2020) and is payable by check or money order.

I've enclosed a check for _____

I've paid on-line at www.michelelife.com (on-line charges apply)

Checks payable to:
Dharmanaut LLC
3996 Rector Ave NE
Rockford MI 49341

Release:

I am in good health and feel confident in my ability to participate safely in this Ayurvedic Yoga Retreat. I have read and understand the above payments and have read and understand the cancellations policies and agree to abide by them. I agree to hold Dharmanaut LLC and the retreat leaders free and harmless from any and all claims, demands, damages, costs, expense, loss of services, and causes of action resulting from my participation in the retreat.

Signed: _____

Date: _____

Complete & send this form to the above address or email to michele@michelelife.com



Cancellation Policy

A non-refundable deposit of \$500 per person is required to hold your space for this retreat and is due at the time of registration.

In the event of cancellation:

- * 60 days or more prior to the retreat: Your entire payment will be refunded, less \$500 deposit plus a \$50 administration fee.

- * 59-30 days prior to the retreat: Less your \$500 deposits, your remaining balance can be applied to future a future retreat only within 2 years.

- * 29 days or less prior to the retreat: Forfeit all retreat money rendered.