

## Workshop Registration Form

**Workshop Name:** Introducing Equus: Including Horses in Human Healthcare and Education

**Workshop Dates:** Sept. 27<sup>th</sup>-29<sup>th</sup>, 2019

**Location:** Banyandah Nationally, NSW

**Workshop Fee:** Register prior to July 15<sup>th</sup> \$625.00 USD / Register after July 15<sup>th</sup> \$825.00 USD

### Registration Details

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Preferred Contact Method: \_\_\_\_\_

Occupation: \_\_\_\_\_

May we share your email address with other workshop participants? \_\_\_ Y \_\_\_ N

### Emergency Contact Information

First Contact Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Best Phone: \_\_\_\_\_

### Emergency Contact Information Continued

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Second Contact Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Best Phone: \_\_\_\_\_

**Health Information**

Special Dietary Requirements:  No

Yes (please list): \_\_\_\_\_

Allergies:  No

Yes (please list): \_\_\_\_\_

Do you have any medical or mental health issues we should be aware of or that might impact your participation in this workshop?  No

Yes (please list): \_\_\_\_\_

**Additional Information**

Briefly describe your experience with horses: \_\_\_\_\_

\_\_\_\_\_

Briefly describe your experience with and/or interest in the workshop content: \_\_\_\_\_

\_\_\_\_\_

Briefly describe your goals for this workshop, or what you hope to gain by participating: \_\_\_\_\_

\_\_\_\_\_

How did you hear about this workshop? \_\_\_\_\_

Is there anything else you feel would be helpful for Leif to know about you? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Payment Details

EARLY BIRD SPECIAL is \$625.00 USD. Reserve your spot now and pay in full BEFORE JULY 15th to receive the discount. After July 1st the cost for the workshop is \$825.00 USD.

Morning tea and lunch on Friday and Saturday are included. Dinners are optional and on-site lodging is limited. Both will be billed separately. If you are interested in on-site lodging, you should contact Jane at [banyandahnaturally@bigpond.com](mailto:banyandahnaturally@bigpond.com) ASAP as this will book quickly.

Remember your payment is due in full in USD. Also note that an international handling fee will be included with all credit card and PayPal payments.

**Once Leif has received your registration form, she will email you a PayPal invoice.** You must pay in full before July 15th to receive the Early Bird Discount and your spot is not assured until you submit payment.

### Payment and Cancellation Policy

Payment in full is required to hold your spot in the workshop. If a payment plan is needed, you can arrange this with Leif and provide your credit card information to be billed as determined.

You are eligible for a 100% refund if you cancel more than 90 days from the first day of the workshop and a 50% refund if you cancel after 90 days and before 60 days from the first day of the workshop. Unfortunately, due to travel and facility logistics, no refunds are available if you cancel 60 days or less from the first day of the workshop.

If you find you are unable to attend, here are some possible options for your consideration:

1. You can locate someone else to take your place in the workshop. You would be responsible for collecting the funds you paid for the workshop directly from that individual.
2. We may be able to locate someone else to take your spot. If this occurs, we will refund you 80% of your registration fee.
3. In some cases, we may be able to transfer your fees to a different workshop. This depends upon the type of workshop you have registered for, and if there is a suitable option available in the future. You would be responsible for any difference in cost that might occur.

If for some reason Leif Hallberg or the host facility needs to cancel the workshop, you will receive a full refund of your registration fee. Leif Hallberg and the host facility are not liable or responsible for any cancellation fees associated with travel or accommodations bookings you may have made.

Entering your name below indicates you have read, understand and agree to abide by this policy.

\_\_\_\_\_ Name \_\_\_\_\_ Date