

The Northwest School for Botanical Studies

Weekend Herbalism Course

Registration Form

The dates for the Weekend Herbalism Course are November 8th 2009 through June 6th 2010. Classes are held on Sundays from 11 am - 5 pm. The class dates for the course are the following: 11/8, 12/6, 1/10, 2/7, 3/7, 4/4, 5/2, and 6/6.

Students are responsible for providing their own food, transportation, and lodging. Students will need to bring lunch and snacks to class on Sunday; there will be a lunch break provided.

The tuition fee is nine hundred dollars. A two hundred dollar non-refundable deposit is required to hold a space; the remainder of the balance (\$700) is due on or before the first day of class. Early bird discount: save \$50 by paying the tuition in full (\$850) by October 1st.

Please complete the following registration form and mail in with a two hundred dollar deposit. If you would like to pay by credit card, please email us your request and we can invoice you. You can make checks payable to: NW School for Botanical Studies or to Christa Sinadinos.

Personal information

Name _____

Address _____

City, State, Zip _____

E-mail Address _____

Work Phone _____ Home Phone _____

Date of Birth _____

Female _____ Male _____

How do you plan to pay for the course? (Circle one) Cash Check Credit Card

Can you pay for the program in full by November 8th, 2009? _____

How did you hear about the NWSBS programs (website, search engine, word of mouth, Moonrise Newsletter, other advertisements)?

Answer the following questions on a separate sheet of paper.

- 1) Why are you interested in taking this course?
- 2) List what herbal courses you have taken in the past, or your previous experience in herbal medicine, gardening, or farming. (Note- no prior experience is required for this course).

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Emergency Contact Information

In the unfortunate case of an emergency, please include the name, the phone number

1) Name _____

Home Phone _____ Work Phone _____

2) Name _____

Home Phone _____ Work Phone _____

I certify that the information recorded in this application and all other application submissions are true and correct. Otherwise, I understand that I may be dismissed from the program.

Signature _____

Name Printed _____

Date _____