Registration Form ARCI Conference March 19 to 22, 2021

Integration Into the Wholeness of Life Charleston, SC

| Name: | | | HM Phone: | Cell Phone: | |
|------------|---|----------------------|--------------------------------|-------------------------|-----------------|
| Mailing | Address: | | | | |
| E-mail A | .ddress: | | | | |
| | Registration | Date | Price | Total |] |
| | ARCI Conference Full 4 day package | Mar 19 - 22 | \$720.00 | | |
| | ARCI Conference Main Conf 2 day | Mar 20 - 21 | \$360.00 | | |
| | Pre Conference | Mar 19 | \$180.00 | | - |
| | Post Conference Continuing Ed | Mar 22 | \$180.00 | | - |
| | Single day of your choice | | \$180.00 | | - |
| | Consultants Membership Mambarship | Annual | \$150.00 | | - |
| | Membership Teachers Membership | Annual Annual | \$79.00 \$185.00 | | _ |
| If you are | e attending in person, pl | ease call the home | Tota office for information | | - gs. |
| | l that apply:□ I am an s receive 10% discount o | | | | |
| check or | emit fees in US Dollars of money order payable to ion form with payment t ARCI Busin | ARCI or fill out the | | tion below and return t | |
| Please bi | Phone 843-9 | | www.learnakasł | | |
| Card# | | | Exp: | Zip Code: | |
| Security C | Code: | | | | |
| | re: | | | | |
| | to be photographed or v | | | | |
| Signatur | re: | | | | |