The Enneagram Centers of Mount Shasta & Ashland
Online Registration Form

Participants(s): **Name** **Age** **Type (if known)**

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How well does each participant know the Enneagram?

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Have any or all of the participants attended Enneagrams workshops, retreats or seminars in the past?

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_____

Title and date of the workshop, retreat or presentation for which you are registering _____

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_____

Contact information: (phone, email, address)

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To complete your registration and reserve your space, print out this form and return it, with a check or money order, for $25 per person to:

Carl Marsak
339 Morton St.
Ashland, OR 97520

This deposit is fully refundable up to three days in advance. After that, it may be applied to a future event.