Celestial Acupuncture & Ashtanga Yoga Certification Seminar Retreat – 2024 Registration Form

Please complete in full and submit along with a minimum **deposit of \$500**, a signed **Retreat Agreement**, **Copy of travel insurance** and a **Copy of Passport** by appropriate deadline.

Payment may be submitted either by Venmo, PayPal, money order or cashier's check made out to Atsuki Maeda and mailed to: Maeda Acupuncture Group, 3248 Sepulveda Blvd. Torrance, CA 90505,

Name (Las	st, First, MI):			
Address:			City	
				DOB:
				(Please indicate)
CA CEU rec	quired? 🗖 Yes 🗖 No PD)A required? □Yes □No	L.Ac. License #:	NCCAOM #:
				_ Relationship:
Phone Nun	nber:	Email:_		
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				visa to travel to Indonesia.)
	· · · ·	•	/international-trav	rel/International-Travel-Country-Information-Pages/Greece.html for
	n on obtaining travel visas			
				Check-Out Date:
Name of ro	oommate, if applicable:			
Total amou	unt submitted with applica	tion: \$		
Included wi	ith Application:			
ſ	Deposit/Full Payment			
ĺ	Signed Retreat Agreen	nent		
Ć	D Copy of passport (Plea	ase submit by Full Payment	Deadline)	
ĺ	T Travel insurance (Plea	se submit by Full Payment I	Deadline)	
Signature o	of Applicant:			Date:
Early Bird	d Deposit Deadline: \$5	500 by December 15th, 202	23	
-	Refund Deadline: Decembe	•		
•	Deposit Deadline: \$500			
•	efund Deadline: January :	, , ,		
•	er of Payment Due			
	by January 15th, 2024			
-)eadline: January 31st, 20)24		
Regular:	by February 15th, 2024			
* Refund D	Deadline: February 28th, 2	2024		

*Refunds will not be issued after the listed refund due dates except in the case the program is cancelled.

Wait-listed participants: You will be notified of your status shortly after your application materials are received. If wait-listed, full payment will be due at the time (and if) an opening becomes available. All wait-listed deposits will be fully refunded if no space becomes available.

*Cancellation of tour if minimum of 10 participants is not met by 02/29/2024