



INDIGENOUS WHOLISTIC HEALING SERVICES

SASKATOON OFFICE: RAYACOM BUILDING, 125 A IDYLYWYLD DR SASAKTOON, SASK S7L 0Y6
REGINA OFFICE: ROYAL BANK BUILDING, 2010 11TH AVE. 7TH FLOOR RM. 707 REGINA SASK S4P 0J3
TOLL-FREE: 1-855-544-2777 **FAX:** 1-306-700-5143

EVENT BOOKING FORM & CONTRACT AGREEMENT

PRESENTER:	ANDREW BEAR
DATE(s) OF THE EVENT:	
SPONSORING ORGANIZATION:	
CONTACT PERSON:	
CONTACT NUMBER:	
EMAIL ADDRESS:	
NATURE OF EVENT:	

ADDITIONAL INFORMATION:

AGREED UPON: \$ _____

PAYMENT RECEIVED OF: \$ _____

REMAINING PAYMENT: \$ _____

SIGNED CUSTOMER: _____

SIGNED SERVICE PROVIDER: _____

DATE: _____

SPECIAL CONDITIONS: TERMS OF AGREEMENT

If set-up outdoor the customer agrees to provide adequate shelter to protect equipment from adverse weather conditions. **INDIGENOUS WHOLISTIC HEALING SERVICES** will not be held liable for any damage or harm to property or persons unless such is caused by gross or wanton negligence on the part of **INDIGENOUS WHOLISTIC HEALING SERVICES**.

By signing this contract, the customer acknowledges that he or she has read and agreed to the terms and conditions set forth in this contract agreement.

Please make all checks or money orders payable to:

**INDIGENOUS HOLISTIC
HEALING SERVICES**

**CUSTOMER SIGNATURE
(Must be at least 18 years of age)**

THANK YOU FOR YOUR BUSINESS
Wholistic healing therapist; Andrew bear
**INDIGENOUS WHOLISTIC
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CONTRACT DETAILS:

IMPORTANT NOTICE:

PLEASE NOT IF A DATE HAS TO BE RESCHEDULED FOR ANY REASON, THERE IS A \$2,500.00 RESCHEDULING FEE. AFTER THE RESCHEDULING ALL WORKSHOP FEES MUST BE PAID PRIOR TO THE NEW DATE COMMENCING.

OTHER PERTINENT INFORMATION:

COMPLETE CONTACT INFORMATION OF PERSON WHO IS BRINGING ANDREW TO COMMUNITY.

- **NAME:**
- **PHONE NUMBER (CELL PHONE):**
- **ADDRESS OF COMMUNITY:**