

SELF LOVE HOLISTIC HEALING ~Turnbull Hill 101 - Practitioner Discovery~

RESERVATION INFORMATION

Date:	Referred by:		Modality	
Name of Practitioner ((s)			
Address:		City:	St:	Zip:
Phone:		email:		
Phone:		email:		
Airfare) □ **7 Day/6 nig Airfare)	ight ~ "Turnbull Hill 1 ght ~ "Turnbull Hill 101 fundable deposit by	Retreat Discovery		
**Pay 40% Non-Refundable deposit by and and				
□ *** \$900 w □ *** \$1800	-			•
***Total Due: \$		**40% [Deposit Rec'd:	\$
Pymt Rec'd:	<u>-</u>	Balance	e Due: \$	\$
Please describe yo	ur highest priorities a	nd primary area	of focus for you	r retreat planning:
Special intentions,	instructions, reques	sts:		
Dietary and Speci	al Needs Request (i.e.	Vegan; Vegetaria	ın; Allergies):	