



New Paradigm MDT Workshop Registration Form

YES, I choose to register for the following course at:
Castle Mountain, Stamford, NY 12167

New Paradigm MDT Basic Master
\$333 (Two days, 16 hrs, Sat., July 21 & Sun., July 22, 2018)

I enclose a \$125 deposit (non-refundable)** for New Paradigm MDT Basic Master

MAIL TO:
NELL T. REBOH, 552 BUCKHORN LAKE RD, UNADILLA, NY 13849 or
 I am paying online via Paypal.com to nell@elxr.com
& send registration via email

>>> BALANCE OF PAYMENT
\$208 IS DUE July 16, 2018, can be done in two installments of \$104
anytime by July 16, 2018

Name as you want it printed on your certificate:

Mailing Address: _____

Phone #1 _____ Phone # 2 _____

E-Mail _____

Other New Paradigm MDT courses you have taken (if any):

E-lxr Nell Tomassen Reboh

552 Buckhorn Lake Rd, Unadilla, NY 13849

nell@e-lxr.com ☎ +1-516-317-1108





Personal Commitment & Relevant Info

Check all that apply:

- New Paradigm MDT Basic Master
 New Paradigm MDT Basic Master Teacher

I, _____ (your name), do now invoke my I Am Presence (authentic Divine being) to help me prepare for this/these workshop(s), and to guide me during and after it/them. I align my will with the Divine will of my I Am Presence. I agree to refrain from substance abuse during this/these workshops to avoid interference with my perception, the quality of the workshop(s) and its participants.

In case of emergency, you may contact the following person(s), and any relevant medical personnel:

Name: _____ Phone: _____

Name: _____ Phone: _____

I have the following medical conditions/allergies/other relevant info:

**In case of cancellation deposit(s) will be applied toward future workshop dates, TBD between course participant and course facilitator, Nell Tomassen Reboh.

In gratitude, Love and Service,

Nell T. Reboh

Signed: _____ Date: _____

Course participant