

SEMINAR TITLE:

Name of participant (s)			
(Please list additional participants separately with titl			
Organization			
Position			
Address			
City	State		Zip
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Phone ()		Fax ()	
		/	
Email			
Credit Card Number:			Exp. Date
			_ Lap. Dutt

You can also use your credit card to register when you call our office.

Fax this form to: (208) 376-8724

Mail this form to: **KITUKU & ASSOCIATES** P.O. Box 7152 Boise, Idaho, 83707

Cancellation terms: You can transfer your registration to future workshops. You are guaranteed a 100% refund if you cancel your registration 45 days before the day of the seminar. A \$39 administrative fee will be subtracted from your registration amount if cancellation occurs between 44 days and two weeks before the seminar. There is no refund if cancellation occurs within 14 days before the seminar.