

S I G N - U P

Family Constellation Workshop with Harald Homberger and Ursula M.L. Nickel

Date: **May 9-11, 2008**

Cost: \$360

Please fill out and mail this form with full payment payable to Nickel Acupuncture, LLC to 3212 Monte Vista NE, Albuquerque, NM, 87106, to reserve your space. There is a refund of \$260 if you cancel by April 20. No refunds after April 20, 2008.

Name _____

Address _____ City _____ State _____ ZIP _____

Phone _____ e-mail _____

I will bring a female guest _____ I will bring a male guest _____
I will come alone _____ I don't know yet _____

Release from Liability:

I understand that attending the Family Constellation Workshop may bring up strong emotions or old memories. I understand that neither Ursula M.L. Nickel, LLC nor any presenters guarantee success or effectiveness. I further agree that FAMILY CONSTELLATION WORK DOES NOT REPLACE MEDICAL TREATMENTS.

In consideration of being permitted to attend this workshop, I agree to assume the risk of any injury and to voluntarily release, waive, discharge and relinquish any and all claims or causes of action for personal injury which may arise as a result of my attendance at this workshop.

Participant's signature