

**SCHOOL OF GEOMANCY
REGISTRATION**

Please print

Name: _____

Address: _____

City / State / Zip: _____

Telephone: (_____) _____

Email Address: _____

Amount enclosed: _____ for the _____ Unit(s)

We will accept a check drawn on a US bank. Please make it payable to **SteinerBooks**.

Registration Deadline for the September Unit: August 1st.

If you wish to pay by credit card, complete the following:

Visa/MC/Amex #: _____

Expiration Date: _____

Name as it appears on the Card: _____

Signature: _____

Register by sending this form and your payment to:

**SteinerBooks
610 Main Street, Ste. 1
Great Barrington, MA 01230**

Or: Fax it to us at 413-528-8826.

Or: Call Marsha Post with your registration information at 413-528-8233, ext. 203.