

Dr. Darin Mazepa Presents Breakthrough 2024
A Transformational Healing Retreat
Saturday, May 18th, 2024

(Please Print)

First Name: _____ Last Name: _____

Address: _____ City: _____

State: _____ Zip: _____ E-mail Address: _____

Are you currently under Network Care? __YES __NO If yes, for how long? _____

Who is your practitioner? _____

Wear loose fitting, natural fiber clothing that allows for free movement. It is beneficial to register with a spouse, life partner or friend to share your personal evolution. The program starts promptly at 9:00 AM so please arrive 30 minutes before to allow sufficient time for registration and light morning refreshments. This full-day program consists of 3 powerful entrainments and 3 energizing workshops specifically designed to support your mind, body and spirit. A healthy, replenishing lunch will be provided as well. We will conclude our time together by 6:00 PM.

To complete your registration, include this form with your tuition payment:

*** \$350 total if paid by Saturday, May 4 with completed registration form (\$50 off)*

*** \$375 total if paid by Saturday, May 11 with completed registration form (\$25 off)*

*** **Financing Option:** \$400 total. Down payment of \$100 due with completed registration form. Second installment of \$150 will be drawn on Friday, May 17. Final installment of \$150 will be drawn on Saturday, June 1. (Other special financing options will be considered if needed.)*

Due to the nature of this program, refunds are not available.

Enclosed is my Tuition Payment of \$ _____

Please indicate payment type:

Cash: \$ _____ Check: # _____

Mastercard Visa _____/_____/_____/_____ exp. ____/____ CVV: _____

E-mail us at **info@thevitalitycenter.com** for any further questions about registration.

