



2018 Moving For Life Certified Instructor Training Prerequisite Workshop Mail-in Registration Form

GENERAL INFORMATION

First Name:

Last Name:

Address:

City:

State:

Zip:

Home/Cell Phone:

Email:

SELECT WORKSHOP(S)

- \$300 | Developmental Movement
 - \$60 | Unravelling the Stress Response
 - \$60 | Breathing From the Heart: Somatic Anatomy® Workshop
 - \$60 | The Body in Translation
 - \$____ | Advanced Workshop: _____
-

\$ ENCLOSED PAYMENT

Please make checks payable to "Moving For Life" and send to:
Moving For Life
55 Avenue C, South Storefront
New York, NY 10009
