

# 15<sup>th</sup> Annual ZBHA Benefit

## “Everyday Alchemy”

May 4 - 6, 2018 – The Claggett Ctr, 3035 Buckeystown Pike, Adamstown, MD 21710

Benefit hours: Friday 5/4 7:30-9:30pm, Saturday 5/5 9am-5pm, Sunday 5/6 9am-12pm  
 Pre-Benefit class: Friday 5/4 1:30-5:30pm: “Advancing Your ZB Skills: Individualized Tutorial and Touch Feedback with Faculty”

### Registration Form - STUDENT

PERSONAL DETAILS: Please print clearly. Please submit full payment or deposit with this registration form.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Street Address: \_\_\_\_\_ Apt/Suite/Unit: \_\_\_\_\_ City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Best phone # to reach you: \_\_\_\_\_ E-mail: \_\_\_\_\_

TUITION Fees	Amount
<input type="checkbox"/> Zero Balancing Benefit only	paid by April 2nd: \$395 after April 2nd: \$420 \$395 or \$420
<input type="checkbox"/> ZB Benefit plus Friday’s Advancing Your ZB Skills: Individualized Tutorial and Touch Feedback with Faculty	paid by April 2nd: \$475 after April 2nd: \$500 \$475 or \$500
<input type="checkbox"/> Friday Class Only - Advancing Your ZB Skills: Individualized Tutorial and Touch Feedback with Faculty	paid by April 2nd: \$110 after April 2nd: \$135 \$110 \$135
<input type="checkbox"/> Saturday Only	paid by April 2nd: \$150 after April 2nd: \$175 \$150 \$175

Total Tuition: \$ \_\_\_\_\_

ROOM AND BOARD Fees	Amount
<b>All costs are per person in the Christiane Inn w/Private Bath. Bed and bath linens provided.</b>	
<input type="checkbox"/> Friday pm arrival (2 nights, 6 meals)	Single Double \$250 \$225
<input type="checkbox"/> Day Use Fee for those staying off-site*, # days: _____	\$18.00/day
* For those who choose to stay off-site, meals may be purchased separately: <input type="checkbox"/> Add meals:	\$13.00/breakfast; \$14.50/lunch; \$19.00/dinner

Room and Board Fee: \$ \_\_\_\_\_

Add Tuition and Room and Board fees together for Total Fee: \$ \_\_\_\_\_

Roommate request: \_\_\_\_\_ Payment enclosed (minimum \$100.00 deposit required): \$ \_\_\_\_\_

Balance due by April 18th: \$ \_\_\_\_\_

Other information
<input type="checkbox"/> I prefer vegetarian meals <input type="checkbox"/> I prefer non-vegetarian meals    (choose one option)
<input type="checkbox"/> I can bring a ZB/massage table (very much appreciated!)

**PAYMENT DETAILS: \$100 deposit required w/registration, balance due by April 18th.**

- Check (made payable to “Zero Balancing Health Association”)
- Credit Card (For security, please do not e-mail CC information, please fax your form with cc information to 410-381-9634; or call the office instead.)

**Refund Policy: Cancellations** received in writing by April 18<sup>th</sup> will receive a refund minus a \$75.00 administrative fee. If received after April 18th, fees are non-refundable

### How to register:

Email: (scanned PDF document) [zbha@zerobalancing.com](mailto:zbha@zerobalancing.com) • Phone: 410-381-8956 • Fax: 410-381-9634  
 or mail form to Zero Balancing Health Association • 8640 Guilford Rd, Ste 224, Columbia, MD 21046