

The Mystery of the Nine Morgens: Application Form

Please print and complete, then post the form to:
Glastonbury Goddess Temple, 2-4 High Street, Glastonbury, Somerset BA6 9DU, UK

Name

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Address

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Postcode/Zip Code

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Country

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Telephone

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Mobile Phone

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Email

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- Please tick if you would like to join our Goddess Temple Mailing List. You will receive updates and information about courses and occasional Goddess Temple and Goddess House news. You can, of course, choose to unsubscribe at any time.

Information about Fees

This section is for information. You can pay your fee on the website application page:

<https://goddess temple teachings.co.uk/wordpress/ninemorgensretreat/morgens-retreat-registration-page/>

Earlybird Fee paid in full before 1st March 2019: £180

Full Fee paid on or after 1st March 2019: £200

A deposit of £100 reserves your place. This needs to be paid by 28th February 2019, with the full fee balance of £100 payable on or before 28th March.

You are also welcome to pay by direct banking, our bank details are as follows:

Glastonbury Goddess Temple, 2-4 High Street, Glastonbury BA6 9DU
Bank: HSBC, 101 High Street, Street BA16 0EY
Sort Code: 40-22-07, Account No: 71396153
BIC: HBUKGB4131W, IBAN: GB86HBUK40220771396153

If you're paying from outside the UK, you may find Transferwise useful as they charge lower fees and send payments quickly. They can be found at <https://transferwise.com>.

You can use the bank details above to pay via Transferwise or through your own bank.

Please don't hesitate to contact us here: <https://goddess temple teachings.co.uk/wordpress/contact-us/> if you need any assistance.

Because the nature of these trainings is transformative and energetic it is important for the tutor to know of certain mental & physical conditions. Answering these questions enables me to ensure your safe participation within the group and to recognise those times when it may be wiser to observe rather than to participate. It is a requirement for you to answer the following questions.

All information is held in total confidence.

1. Do you suffer from any of the following conditions?

Epilepsy, diabetes, asthma, high or low blood pressure, heart condition, allergies
YES/NO*

2. Do you have or have you had any medical problems of an acute or chronic nature?

YES/NO*

3. Have you ever had any mental health problems diagnosed or treated?

YES/NO*

4. Do you have any physical needs that it would be useful for your tutor to know about? (Please note – we regret that many of our rooms are upstairs) YES/NO*

5. Are you taking any drugs, prescribed or otherwise?

YES/NO*

If you have answered YES to any of the questions above, please give details:

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* Delete or cross out as applicable

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