

**BOOKING FORM
ENCOUNTERING THE ENNEAGRAM**

SATURDAY 1st OCTOBER 2011



PLEASE COMPLETE ALL SECTIONS AND WRITE IN BLOCK CAPITALS

Title: _____ First name: _____ Surname: _____

Occupation: _____ Place of work: _____

Work Address: _____

Work Tel: _____ Post Code: _____

Home Address:

Post Code: _____ Home Tel: _____ Mobile: _____

Home E-mail: _____

COST: £40.00

Please make cheques payable to "The Well, Peterborough" - receipts will be given on the training day

ADDITIONAL NEEDS

Please specify any special dietary, mobility, audio or visual requirements:

Website

Other

Please tick if you **do not wish** to be included on our database

Please return completed form with payment by post to:

Revd. Chris Mason, 74, Derby Drive, Peterborough, Cambridgeshire PE1 4NQ