

A Course In Practical Herbalism

Registration Application

Date: _____

Name: _____

Address: _____

City: _____ State _____ Zip _____

Email Address: _____

Home Phone: _____

Work Phone: _____

Occupation: _____ Full Time Part Time

Emergency Contact: _____

Phone numbers: _____

Email: _____

How are you currently using herbs?

Have you attended any herb classes before now? With whom?

Do you have any allergies to bees, dogs, cats or chickens? Allergies to anything else?

Is there anything you would like for me to know about you?

Tuition

Please indicate how you will make your payments:

_____ **Early Bird Rate:** \$700.00 by Dec 1, 2015
\$200 deposit required before Dec 1, 2015
Balance of \$500 due January 15, 2016

_____ **Regular Rate:** \$750.00 (after Dec 1, 2015)
\$200 deposit required
Balance of \$550.00 due January 15, 2016

_____ **Payment Plan:** \$775.00
Deposit \$200 to reserve your space
\$250 due January 15, 2016
\$225 due February 12, 2016

The \$200 deposit is non-refundable, unless the class doesn't make.

Deposits and payments can be made online: <https://goo.gl/uvEFse>

1. Create a log-in & profile
2. Enter your credit card to be kept on file
3. Go to Online Store tab
4. Choose gift cards
5. Select which payment you want to make in this section
6. Check out.

Cash and checks can also be accepted, or payments can be made through Square Cash.

Please indicate how you will pay:

- _____ I will pay online (follow instructions above)
- _____ By Check
- _____ By Cash
- _____ By Square Cash (I will send you a link)

Please either mail completed application to:

Gracie's Garden, LLC
3007 Dawn Dr. Suite 102
Georgetown, TX 78628

Or

Email to: graciesgardentx@gmail.com

I understand and agree to the terms of the payment plan I have chosen.

Signature

Date

Print Name _____