

**26<sup>th</sup> INTERNATIONAL CONFERENCE  
OF THE SOCIETY FOR THE STUDY OF SHAMANISM, HEALING AND  
TRANSFORMATION  
September 5-7, 2009**

**CONFERENCE REGISTRATION FORM**

Please PRINT CLEARLY. All information is required to complete the registration. Thank you.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

I am willing to be assigned a roommate \_\_\_\_\_

I want to share a room with \_\_\_\_\_

Food Preference: Vegetarian \_\_\_\_\_ Non-Vegetarian \_\_\_\_\_

Please let us know if you have any special need \_\_\_\_\_

Conference Fee Registered Online by PAYPAL on our website  
[www.shamanismconference.org](http://www.shamanismconference.org) or by check POSTMARKED

Rate Per Person (rate includes conference fee, room and all meals)	By June 15	By July 31	By August 31
Double Occupancy (share with a roommate, two single beds per room)	\$260	\$310	\$350
Single Occupancy (limited numbers of single rooms available)	\$350	\$350	\$390

Enclose your check for the full amount, made out to:

**The Society For the Study of Shamanism, Healing and Transformation**

P. O. Box 2172, El Cerrito, CA 94530

(You will receive an email or phone confirmation. Your cancelled check is your additional confirmation)

Questions for Registration: [registration@shamanismconference.org](mailto:registration@shamanismconference.org)  
Information for commuter's rate, refund policy and more, please check our website.