

Three Souls

ONE SPIRIT

APRIL 12-14, 2019

REGISTRATION FORM

Register Online at www.corosinstitute.org

Name _____

Address _____

City _____ State _____ Zip _____

Email _____

How did you hear about this event? friend website email list postcard / poster

Total Amount Enclosed \$ _____ I would like a receipt.

Please make checks payable to Coros Institute and mail to: **Coros Institute, PO Box 1702., Fair Oaks, CA 95628**