

# Registration Form

You can register for events individually or for a special weekend pass.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_

Zip \_\_\_\_\_ Email \_\_\_\_\_

**Pricing for individual workshop events:** Prices include a small service fee.

**All 3 hour Workshops except featured presenters:**

\$40 members, \$50 non-members, \$30 students w/ID & seniors 65+, teens \$10

Pre-conference and featured workshops – see workshop descriptions for prices for early bird, member, non-member and students/seniors

**SPECIAL PACKAGE FOR MEMBERS (includes banquet)**

Package does not include Jalaja Bonheim and Donna Eden pre-conference workshops

**Weekend Pass** Friday eve, Feb. 14<sup>th</sup> – Monday, Feb. 17<sup>th</sup>

\$295 Members  \$98 Teens 13-18  \$180 Young Women 19-29

**MEMBERSHIP**  \$25 students/seniors  \$35  \$75  \$150 Membership \$ \_\_\_\_\_

**WORKSHOP SELECTIONS:**

*To ensure your space, you must pre-select the workshops of your choice.*

<b>Date/Time</b>	<b>Presenter</b>	<b>Title</b>	<b>Price</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Total Workshop Fees \$** \_\_\_\_\_

**EVENING SPECIAL EVENTS Open to men (except banquet)**

**Thurs Feb 13 Eve Workshop**  \$25 Mem  \$35 Non-Mem  
 \$20 Students/Seniors  \$40 VIP front row seats  No. of tkts \$ \_\_\_\_\_

**Fri Feb 14 Evening**  \$20 Mem  \$25 Non-Mem  
 \$15 Students/Seniors  \$30 VIP front row seats  No. of tkts \$ \_\_\_\_\_

**Sat Feb 15 Evening**  \$20 Mem  \$25 Non-Mem  
 \$15 Students/Seniors  \$30 VIP front row seats  No. of tkts \$ \_\_\_\_\_

**Mon. Feb 17 Banquet**  \$20 Mem  \$25 Non-Mem  No. of tkts \$ \_\_\_\_\_

**Total Special Events \$** \_\_\_\_\_

Make checks payable to **Donations for scholarships \$** \_\_\_\_\_

Women of Wisdom Foundation (WOW) **TOTAL PAYMENT \$** \_\_\_\_\_

Mail this form to Women of Wisdom, PO Box 30043, Seattle, WA 98113

**Payment:** Check No. \_\_\_\_\_ Credit card  Visa  M/C  Am Exp

Card Number \_\_\_\_\_ CVC Code \_\_\_\_\_

Signature \_\_\_\_\_ Exp. Date \_\_\_\_\_