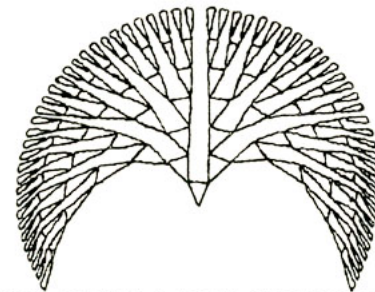


# Master Class Program Application Form



SOMATIC ARCHAEOLOGY™

Training Location \_\_\_\_\_

Today's Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Education \_\_\_\_\_

Degrees/Professional Background \_\_\_\_\_

Ancestry \_\_\_\_\_ Date of Birth \_\_\_\_\_

Emergency Contact \_\_\_\_\_

How did you hear about this training?

\_\_\_\_ flyer \_\_\_\_ radio \_\_\_\_ conference \_\_\_\_ colleague \_\_\_\_ publication \_\_\_\_ other

Any special needs you have? \_\_\_\_\_

Professional License #/State \_\_\_\_\_

Do you have any grievances, complaints or actions pending or upheld against you for misconduct as a professional? \_\_\_ No \_\_\_ Yes (If yes, attach details and outcome)

Please attach the following typed documents when submitting this application:

1. A current Curriculum Vitae or Resume.
2. A one-page Personal Biography.
3. A statement of your interest and goals in this Somatic Archaeology™ training.
4. Personal / familial / cultural traumas experienced.
5. Overall Personal Health Synopsis.

All information submitted will be held confidential.

Mail your complete application with registration fee to the address below.  
Your application will be reviewed and you will be notified of acceptance within two weeks.

Freedom Lodge, Inc. PO Box 811, Evergreen, CO 80437  
303-670-7300 ♦ trainings@rubygibson.com ♦ www.rubygibson.com

Applicants accepted into the Somatic Archaeology™ Master Class Program must complete all four weekends of the training program in succession. Emergency situations will be taken into consideration. In addition, you must agree to the following provisions:

- 1) This advanced program is designed to supplement your profession, not to create one. All graduates must comply with their local and/or state regulations regarding licensure of body workers, psychotherapists, counselors, etc.
- 2) Student must provide Freedom Lodge with copies of educational certifications or degrees.
- 3) Student must be willing to abide by professional ethics and standards of care that display integrity in their actions and respect the boundaries of their clients.
- 4) Students must accept full responsibility for their well-being, participation in, and creation of, this program.
- 5) Full attendance is required. In emergency circumstances, class make-up may be offered.
- 6) Students must pay an application fee when submitting this application form.
- 7) Tuition must be received in full to begin training program, or a payment plan can be signed.
- 8) A certificate of completion will be issued only upon payment in full of all tuition charges.
- 9) Students must purchase & read Ruby Gibson's book, My Body, My Earth, in advance of training.

#### Tuition Breakdown

Application fee =	\$100.00 (non-refundable, except with non-acceptance into program)
Training program =	\$2,000.00
Training materials =	Included in tuition (Additional materials for use in training are optional.)
Total Tuition =	<u>\$2,100.00</u>

#### Payment Option

Students may pay tuition in four equal payments of \$500, payable on the 1st day of each training month, for no additional interest fee. This option applies to payment by cash or check only, and a payment agreement must be signed.

#### Refund Policy

Prior to completion of 50% of the program hours (or 50 hours), 30% of tuition is refundable. After completion of 50% or more of the program hours, no refunds are given. If program is cancelled, a full refund (\$2,000.00) will be given. Application and tuition fees paid in advance can be transferred to a future training if the program you registered for is cancelled.

#### Cancellation

Freedom Lodge reserves the right to cancel or reschedule the training due to low enrollment. Should your class be cancelled, you will be notified as soon as possible. Freedom Lodge is not liable for expenses incurred due to cancellation, including airfare or hotel cancellation fees.

#### Payment Options

I will be paying by: Check \_\_\_\_\_ Cash \_\_\_\_\_ Money Order \_\_\_\_\_  
Credit card payment accepted through Paypal on our website at [www.rubygibson.com](http://www.rubygibson.com).  
Total amount enclosed with this Application Form is \$ \_\_\_\_\_.

Make checks/money orders payable to: Freedom Lodge, PO Box 811, Evergreen, CO 80437.

By signing below, I agree to all above provisions and apply for the Somatic Archaeology™ Master Class 100 Hour Certification Program.

Name \_\_\_\_\_ Date \_\_\_\_\_

Somatic Archaeology™ Master Class  
Payment Plan Agreement Form

I, \_\_\_\_\_,  
(your printed legal name)

agree to make four (4) payments of \$500.00 each to Freedom Lodge, Inc.  
to be received in our office on the first (1st) day of each training month.

Freedom Lodge, Inc. PO Box 811, Evergreen, CO 80437-0811

All payments must be made by check, money order or cash.

Credit card payments not accepted on this payment plan.

Lack of payment will result in non-participation in training program.

Any late payments received may incur a \$25.00 late fee.

Returned check fee is \$30.00 per check.

Please print and submit with your application form.

I have read the above provisions, and agree to this payment plan.

\_\_\_\_\_  
(your signed legal name)

\_\_\_\_\_  
Date