



Contemplative Practice, Spring 2018 Registration Form

Name _____ Waldorf connection if any: _____

Address _____ City, State, Zip _____

Phone(s) _____ Email _____

I am registering for the following GLWI course (check one):

Title	Dates	Cost
<input type="checkbox"/> Contemplative Practice – 2-units full course as GLWI student (required for Certificate)	February 2 nd -April 16 th , 2018	
	Tuition	\$1,090
<input type="checkbox"/> Contemplative Practice – full course for adult enrichment	February 2 nd -April 16 th , 2018	
	On or before January 19 th	\$ 545
	After January 19 th , 2018	\$ 570
	Plus retreat meals	TBD
<input type="checkbox"/> Contemplative Practice – retreat only	February 2 nd -April 16 th , 2018	
	On or before January 19 th	\$ 125
	After January 19 th , 2018	\$ 150
	Plus retreat meals	TBD
	Total due _____	
	Total remitted _____	

Payment Plans:

Full course for credit toward a Waldorf Teaching Certificate in **four monthly** installments of \$272.50 each

Full course for adult enrichment in **four monthly** installments of \$136.25

Enclosed is my payment of _____ to "**Great Lakes Waldorf Institute**" and mailed to:

Great Lakes Waldorf Institute
Ed Dept., Mt Mary University
2900 N. Menomonee River Pkwy
Milwaukee, WI 53222

Confirmation of registration will be sent to your email address if provided.

Thank you!

How did you find out about this opportunity? _____