

**"SPIRITUALITY & HEALING" with Dr. Joan Borysenko & Gordon Dveirin
Friday, December 4 - Sunday, December 6, 2009**

Havurah Shir Hadash in Ashland, Oregon

Questions? Contact Cathleen Katz at ccontentment@Ashlandhome.net or call (541) 488-1148

To Register

Registrant Name: 1. _____
2. _____
3. _____

Contact Info: Name _____ Phone (____) _____
E-mail _____ Address _____

Payment Info:	Number	Total \$
• Early Registration (by November 10) @ \$195 each	_____	_____
•• Regular Registration (after November 10) @ \$235 each.....	_____	_____
• Optional donation to our Special Needs Scholarship Fund.....	_____	_____
TOTAL DUE.....	\$ _____	

Payment (your reservation will be held once full payment is received):

Check enclosed. Mail to Havurah Shir Hadash, P.O. Box 1262, Ashland, OR 97520

Pay Pal via our website (www.havurahshirhadash.org)
Be sure to designate "Borysenko Weekend"

Credit Card: Visa ___ Mastercard ___
Name as it appears on the card: _____

Credit Card Number: _____

Expiration Date: _____ Three digit security code: _____

Home Stays

A limited number of home stays can be arranged. Priority will be give to those with the greatest financial need. Donations to the Havurah for arranging your home say would be appreciated.

- Financial need (please circle one) 1 (great) 2 3 4 5 (no need, I just like the idea)
- Number of persons (total) _____
- Pet allergies? _____ Physical limitations? _____

CHILD CARE

- **Questions about housing and/or Partial Work Trade?** Contact Deborah-Miriam Leff at debleff@juno.com

Child Care* (you will be contacted)

Please indicate if you will need childcare for the weekend. ___ Yes ___ Age of Child

* There will be an additional fee for childcare.