

**IE Level I Workshop
2007 Registration Form**

Name: _____

Address: _____

Phone # _____ Fax # _____

e-mail _____

Profession: _____

**Where did you first hear about Prof. Feuerstein and/or
Instrumental Enrichment?**

Where did you find out about this workshop?

Are you interested in this workshop for:

___ professional reasons

___ personal reasons

**Please enclose a cheque for \$500.00 (deposit) and send it along
with this form to:**

**TCML
534 Lawrence Avenue West, Suite 212
Toronto, ON
M6A 1A2**

\$500.00 balance due by July 13/07

**Registration fees include MLE reference book, and the 4 instruments
(for personal use only) and accompanying manuals that we will be
learning.**