

Registration Form
Tour: Guatemala
Akashic Records Intensive and
Consultant training
April 11th ~ 24th, 2020

Please complete this registration form, sign and email it with your deposit of \$500.00 to:

Journey to the Heart, Corp.
Phone 305 632-5603 • Kiva101@aol.com
www.Journeytotheheart.com

A separate registration is required for each traveler. We suggest you photocopy this form to have a record of your booking and the Terms and Conditions. Please print clearly.

NOTE: All registrations must be submitted via email. **No** regular mail

CONTACT INFORMATION

Name: _____ Phone (days): _____ (evenings) _____
Mailing Address: _____ City: _____ State: _____ Zip: _____
Email Address and Fax#: _____

Prices

Please check your choice of accommodation.

Double occupancy US \$2260.00 _____
Single occupancy US \$2780.00 _____ (limited rooms)
Couples US \$4000.00 _____

Amount of deposit: \$500 _____

1st payment: _____

2nd payment: _____

3rd payment: _____

Payment Method: Visa, MC, AMEX, PayPal

CC#: _____ Exp. Date: _____ 3 Digit Sec. Code: _____

Name on Card: _____ **Amount Authorized:** \$ _____ .00

Payment Plan: Total will be divided into monthly payments, applicable only if complete 30 days prior to departure.

Please view the **“Terms and Conditions”** and complete information on our website

CONSUMER DISCLOSURE NOTICE ~ Journey to the Heart, Corp. and/or their agents act only in capacity as agents for the passenger in all matters connected with hotel accommodations, sight-seeing tours, event participation, all transportation matters or any other means and as agent holds itself free of responsibility for any damage occasioned by any cause. Journey to the Heart, Corp. and/or its agents will not be responsible for any damages or expenses or inconveniences caused by late departures or change of scheduled, strikes or to their conditions, nor will be responsible for loss or damage to baggage or any of the passenger's belongings. Journey to the Heart, Corp. and affiliates, employees, servants and agents shall not be responsible for personal injury, death or property damage as a result of force nature or for any other losses or damages incurred by any person or tour participants caused by any delay or change in itinerary or arising out of any act, including, but not limited to, any act of negligence, any person acting for or on behalf of Journey to the Heart, Corp. for transportation, accommodations, event participation, or sight seeing provider or any other person or entity rendering any of these services or accommodations being offered in connection with these tours. Any dispute arising out of these tours, must be submitted in writing within 30 days of the completion of the tour and will be settled by arbitration within the City of Miami, Florida.

Please initial to signify that you have read, understand and agree to the following:

_____ I acknowledge that the above disclaimer says that I am responsible for myself and will need to use my own good judgment in taking care of myself.

_____ I acknowledge that all rooms are double occupancy, a limited number single rooms are available for an additional cost.

_____ I acknowledge that J to H will provide all breakfasts and some lunches and dinners. Any other food or drink and personal needs will be at an additional cost to me.

_____ I acknowledge that each person is responsible for scheduling and purchasing their own transportation to and from Guatemala on the specified date of arrival.

_____ Each person is responsible for their transportation from the airport to Villa Sumaya where we start the workshop.

_____ I acknowledge that the \$500.00 deposit reserves my space in the tour and is non-refundable. I understand that if Journey to the Heart, Corp. cancels this tour I am entitled to a full refund or may apply it to another tour.

_____ I acknowledge that it is my personal responsibility to be open to new experiences, face any fears or limitations that may come up, and utilize this experience to my fullest and highest good, because I am worth it!

Signature _____ **Date** _____

Guatemala 2020 REGISTRATION FORM 2nd Part

With Don Ernesto Ortiz

Please use an additional page if you need to provide more information

Date: _____

Name: _____

Address: _____

State / Country: _____

Home phone number: _____

Mobile phone number: _____

Email: _____

Occupation: _____

If you desire to share your room with a person you already know please provide:

*Name of the person:

* Type of room you are requesting:

Twin room, double occupancy (2 single beds) or single room, single occupancy (1 single bed)

Limited number of single rooms.

Please provide us with any information about your health that we must be aware of:

Please let us know if: You have ever attempted suicide, if you are under psychiatric care or have been hospitalized for mental disorders, if you suffer from schizophrenia or epileptic seizures?

Please provide the following information:

* Contact person in your hometown:

* Relationship:

* Emergency telephone number:

IMPORTANT: Please provide a photocopy of your passport when you submit your registration

Please acknowledge that Journey to the Heart, Ernesto Ortiz and all teacher assistants do not provide insurance for this tour. You are responsible for taking travel and health insurance of your own.

_____ (Initial here)

I understand that Journey to the Heart workshops are processes designed to assist me in “self-exploration” and “self-healing”. I further understand that these workshops are direct experiences and, though educational in nature, are not treatment or therapy. They are not intended to be used to replace any treatment or therapy which may be appropriate for any person.

In consideration of participation in Journey to the Heart workshops, I hereby release and forever hold harmless and indemnify Ernesto Ortiz, Journey to the Heart, and, other facilitators, assistants, agents, successors and assigns which I may now have or have at any time in the future.

Signature: _____