



Registration for the workshop “Functional Methods” with Jeffrey Burch:

Date: October 15-18 (Thu 9am –Sun 4.30pm), 2020  
Place: ERA, Saarstr. 5; 80797 Munich  
Credits: 4 elective credits for Rolfer™, IASI Type 1 credits for IASI members

Prerequisites for attending the workshop: Rolfers™ and graduates of any structural integration school approved by the International Association of Structural Integrators (IASI).

Training Fee: 740 €  
Early registration: 660€-

To qualify for early registration you need to send your registration and payment before July 15, 2020.

To complete your application, please fill out and sign this registration form and send it to [training@rolfing.org](mailto:training@rolfing.org)

**Registration: Workshop “Functional Methods”**  
**October 15-18, 2020 with Jeffrey Burch**

**Fee: € 740,- regular, € 660,- for early registration before July 15, 2020**

**After sending in your registration you will get an invoice.**

**Cancellation fees:**

**The following cancellation fees apply: Cancellation up to six weeks before start 50 € cancellation fee, up to two weeks before start 50% of the full tuition. Cancellation less than two weeks before start or no-show: 100% of the full tuition. We offer a cancellation insurance issued by our renowned partner ERGO. It covers your cancellation fees (except for a deductible of 20%) in case you are not able to attend the training due to significant events like illness, job loss, relocation. Please refer to the information for further details.**

<https://rolfing.org/becoming-a-rolfer/cancellation-insurance/>

**A minimum number of participants is requested. If this minimum is not reached by August 15, the workshop can be cancelled.**

Registration:

*I have read and agreed to the conditions ([https://rolfing.org/general\\_conditions](https://rolfing.org/general_conditions)) and hereby register for the Workshop “**Functional Methods**”. In particular, I agree to the cancellation policy and have been made aware of the ERGO Insurance company. <https://rolfing.org/becoming-a-rolfer/cancellation-insurance/>*

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**Name**

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**Address**

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**Phone/Fax/email**

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**Date**

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**Signature**