

**2009**  
**Ayurveda Fall Courses & Workshops**  
**UCONN Health Center**  
**Registration form**

Please read "Registration Information" before completing

Please print or type.

Name: \_\_\_\_\_ Degree \_\_\_\_\_

Address: \_\_\_\_\_ Phone # \_\_\_\_\_ E mail: \_\_\_\_\_

Please print or type.

**Registration:**

\*AYURVEDIC SPIRITUALITY, September 25-27, 09 \*\*\$300.00-----

\*INTRO TO AYURVEDIC NUTRITION, November 6-8, 09 \*\*\$300.00 -----

ON WINTER: COPING WITH SEASONAL CHANGES: Dec 4, '09 \$50.00 -----

\*\*ISAH Members (standing) \$280.00 -----

\*For CME Credits (each) \$50.00-----

**Donations:**

Please consider donation: \$15, \$25, \$50, \$100 -----

**Total amount enclosed:** \_\_\_\_\_

Check # \_\_\_\_\_

Make US checks payable to: **ISAH**

Mail to:

**ISAH**

**Post Box: 271737 \***

**West Hartford \***

**Connecticut -06127-1737 \* USA**

**Refund restrictions Apply: Please call Dr. Guha for details: 860-561-4857**

**Please use only one form/person**

**All registrations must be confirmed minimum 1 week before the course.**

For information regarding course and CME information please call  
Dr. Amala Guha: 860-561-4857; [aguha@att.net](mailto:aguha@att.net)

Unless notified all workshops will be held at Conference Room EG-013  
UCONN Health Center, Farmington, CT