Curative Course Training
29September-10Ocotber, 2008

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Name: Mr./Mrs./Miss…….Last Name:…… ……..Age……years.

Address:……..……...Road:……..……..District:…….

Province…….……Country:……...…….Zip Code:….……

Tel.:……..……Fax:……..…….E-mail……

Education Level:……..……From School/College/University:…….…….

Major/Field Area:……Year Graduated:……...…….…...

Applicant's Status: □ Teacher/Instructor:
Teach at …….…….Grade……

□ Parents:…….……...……
□ Other:……...…….……..…...

Area of Interest/Preference/Hobby……..…….……

Books related to Waldorf has been read……...

Seminar/Lecture about Waldorf having been participated:…….…….

Reasons for Applying:……...……

Register Fee : 700 Bath / day 3,500 Bath/course (5 days)

Accommodation

☐ Baanrak Kindergarten contact baanrak@anet.net.th
☐ S C Park Hotel contact tridhaksaschool@yahoo.com

For registrations and inquiry please E-mail to: sirimit1958@yahoo.co.th

Tel: 662-889-1260014, Fax: 662-8969435

Register within 20September 2008

Signed.....Applicant
(.....)
Date...../...../.....