

**REGISTRATION FOR *SOZO* SCHOOL
Level 2**

PLEASE READ: To register for the *Sozo* School, Level 2:

(1) Fill out this form completely and mail it to Dewnamis, 12171 Caminito Corriente, San Diego, CA 92128

(2) Include a check for the full amount.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

I will be attending the *Sozo* School, Level 2 at _____, on
_____ City / State
_____ Month / Year

Prerequisite to attend the *Sozo* School, Level 2.

-Must have attended Basic Sozo Training

PAYMENT

Individual \$50 _____ Check # _____ Amount _____

(Please make check payable to Dewnamis Ministries)

- Day pass is not available -

- Child Care will NOT be provided -

- Minimum age to attend is 16 years old -

- Attendance at all sessions is required to receive a *Sozo* Certificate –

Mail Registration Form to: Dewnamis, 12171 Caminito Corriente, San Diego, CA 92128

Make checks payable to: Dewnamis