

**REGISTRATION FORM  
GENERATIONAL BRAINSPOTTING  
AUSTIN, TEXAS  
APRIL 26-28, 2019**

**PLEASE PRINT CLEARLY - THANK YOU**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE W) \_\_\_\_\_ C) \_\_\_\_\_

EMAIL \_\_\_\_\_

EMERGENCY CONTACT \_\_\_\_\_ PHONE \_\_\_\_\_

PROFESSION \_\_\_\_\_

LICENSE # \_\_\_\_\_ STATE \_\_\_\_\_

**BRAINSPOTTING PHASE ONE IS A PRE-REQUISITE.**

**PLEASE INCLUDE INSTRUCTOR & DATE OF BSP PHASE ONE TRAINING**

**PAYMENT**

**EARLY REGISTRATION: \$695.00 BY 3.25.19**

**LATE REGISTRATION: \$745.00**

DATE OF PAYMENT \_\_\_\_\_

AMOUNT OF PAYMENT \_\_\_\_\_

**CHECK ONE FORM OF PAYMENT:**

\_\_\_ SENT VIA PAYPAL TO RUBYGIBSON@MAC.COM

\_\_\_ SENT VIA CHECK MAILED TO DR. RUBY GIBSON, 809 SOUTH STREET,  
#203, RAPID CITY, SD 57701

**RETURN THIS COMPLETED FORM VIA EMAIL TO RUBYGIBSON@MAC.COM**

**NEED CEU'S? 24 CE'S ARE AVAILABLE FOR THIS TRAINING.**

**LOCATION - SOL HEALING & WELLNESS CENTER 13805 ANN PL, AUSTIN, TX 78728**

**WE LOOK FORWARD TO SEEING YOU IN AUSTIN! ANY QUESTIONS?  
CONTACT DR. RUBY GIBSON AT 303-870-0730 OR RUBYGIBSON@MAC.COM.**