

# Hellinger Institute of DC

10449 White Granite Drive, 596

Oakton, VA 22124-9998

301-215-9168

[HellingerDC@gmail.com](mailto:HellingerDC@gmail.com)

## Registration for 2021 Family Constellations Foundation Facilitator Training

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

Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Office Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Occupation: \_\_\_\_\_

Previous Professional Trainings: \_\_\_\_\_

\_\_\_\_\_

Previous Experience with Constellations: \_\_\_\_\_

\_\_\_\_\_

Previous Personal Development Trainings: \_\_\_\_\_

\_\_\_\_\_

Goals for this training: \_\_\_\_\_

\_\_\_\_\_

**Please provide a current passport photo of yourself via mail or email. Call and set up an interview with the trainers which is a pre-requisite for acceptance in this in-depth training program.**

The cost of the training is \$3,000 with a non-refundable deposit of \$250 required to save your space. A payment plan is available. (Please contact Lynne to arrange)

**There are 2 convenient ways to register:**

**Online: at [www.HellingerDC.com](http://www.HellingerDC.com)**

**By Mail:** Send your completed registration form, photo and signed release form with your credit card number or check made payable to:

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## 2021 Family Constellation Foundation Facilitator Training

### TUITION PAYMENT AND COMMITMENT AGREEMENT

This agreement is between The Hellinger Institute of DC, Susan Ulfelder, Lynne Miller and \_\_\_\_\_ to establish a payment plan for the 2021 Family Constellations Foundation training facilitated by Susan Ulfelder and Lynne Miller. This training will be held online via Zoom/

The training will consist of 6 three-day weekends, Friday - Sunday which I agree to attend the full year. Hours are 9 am - 5 pm EST each day. The tuition is \$3,000 with a non-refundable deposit of \$250 required for registration, along with a photo and interview with the trainers.

A registration deposit of \$250 is required to reserve your place.

The balance of the tuition may be paid in full at the beginning of the training (which entitles you to a \$100 discount) or may be paid in equal installments of \$550 at the beginning of each of the first five training weekends. Payments may be made by credit card or personal check made payable to Hellinger Institute of DC.

<input type="checkbox"/> <b>FULL TUITION</b>		<b>\$3,000</b>
	Registration deposit	- \$ 250
	Discount for full payment	- \$ 100
	Balance due	<b>\$2,650</b>

<input type="checkbox"/> <b>PAYMENT PLAN</b>		<b>\$3,000</b>
	Registration deposit	- \$ 250
	Balance due	<b>\$2,750</b>

**PAYMENT INSTALLMENTS:** The first 5 training weekends payment of **\$550**

or

**PAYMENT INSTALLMENTS OF:**

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#### Cancellation and Refund Agreement:

I agree to the above tuition payment schedule. I understand that I also have a one-time option to discontinue the training within **5 days** after participation in the first training weekend and receive a refund for any monies paid in advance for the remaining weekends. If I find it necessary to discontinue my participation at a later time, I will not receive a refund and I agree to pay the full year tuition whether or not I finish the training. I understand I will be entitled to participate in a future training in Hellinger Family Constellation Work for the prepaid sessions missed at no additional charge. **I understand that all cancellation requests must be made in writing; phone cancellations will not be honored.**

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Signature

Print Name

Date