



# A Society of Souls®

The School for Nondual Healing and Awakening™

## **Application for Nondual Kabbalistic Healing® Training**

### **Contact Information:**

Name  
Street Address  
City, State Zip/Postal Code  
Phone (Day)  
Phone (Evening)  
E-Mail Address  
U.S. or Europe Classes?

### **Profession:**

### **Degrees/Training:**

**How long have you been in your profession?**

**How might you use the work you learn in this training in your life?**

**What are some of the ways you gain self-knowledge?  
Have you taken A Society of Souls workshop or attended an evening presentation with Jason Shulman, Brenda Blessings, Eileen Marder-Mirman, Jeff Elias-Frankel or other ASOS teachers?**

**Why do you want to come?**

**Please attach a recent photo of yourself here:**

**Please note: Applications will be considered in the order in which they were received. If you have not received and acknowledgment within fifteen days, please call us at: 1-406-446-1732**

**For the BOSTON TRAINING:**

**Please return this application to: A Society of Souls % Brenda Carter Blessings, 208 Upper Luther Road, Red Lodge, MT 59068 Via email: [brenda@brendacarterblessings.com](mailto:brenda@brendacarterblessings.com)**

**For the NEW YORK TRAINING:**

**Please return this application to: A Society of Souls % Eileen Marder-Mirman 13 The Loch, Rockville Centre, New York 11570**

**or Fax: 1-732-780-0343**

**Via email: Eileen Marder-Mirman <[eileenmm@optonline.net](mailto:eileenmm@optonline.net)>**

**Please don't hesitate to contact us if you have any questions.**