

**Leaders Path Institute  
Registration Form**



**The Blake Group**  
 HC 1 Box 577, Elgin, Arizona 85611-9729  
 520.455.9393 ♦ Fax 520.455.9398  
[www.blake-group.com](http://www.blake-group.com) • [www.leaderspath.net](http://www.leaderspath.net)

**Participant Contact Information:**

First Name	Last Name
Title	Company Name
Business Address	
Business Phone	Business Fax
Business Email	Mobile/Cell Phone
Home Address	Home Phone
Home/Personal Email	Home Fax

**Attendance Dates:** *Please specify your preference.*

First Choice	Second Choice
--------------	---------------

**Retreat Investment:** *Lodging, travel, and breakfast meals are not included.*

The investment for Leaders Path Retreat depends on the program you want to attend. **Please circle one:**

**Leaders Path II Executive Package** (Individuals only) \$7500.00  
**Basic Leaders Path Retreat** For Individuals - \$2977.00; For Groups - \$1977.00 per person  
**Silver Program** For Individuals - \$3577.00; For Groups - \$2577.00 per person  
**Gold Program** For Individuals - \$5177.00; For Groups - \$4177.00 per person  
**Platinum Program** For Individuals - \$6647.00; For Groups - \$5677.00 per person  
**Diamond Program** For Individuals - \$9317.00; For Groups - \$8317.00 per person

The investment is to be paid no less than three weeks prior to the start date of the retreat you are scheduled to attend.

**Payment Method:** We only accept checks, money orders, or direct deposit (EFT). Make checks payable to The Blake Group. Send payment to The Blake Group, HC 1 Box 577, Elgin, AZ 85611-9729.

**Reschedule:** There are no refunds for rescheduling. Your deposit will remain active for six months, at which time you must request a cancellation refund (see below).

**Cancellation:** If you cancel, you will receive a refund less a \$400.00 processing fee.

**Special Conditions:**

In an effort to make you as comfortable as possible, we want to know of any special medical, physical or dietary consideration. Dietary Needs/Preferences:  No  Yes - Please provide details:

# Leaders Path Institute Registration Form

### Health & Medication:

Are you currently taking any medication:  No  Yes  
Do you have any physical or medical conditions that we need to be aware of?  No  Yes  
Please explain or specify if you have answered yes to any of the above:

### Individual Coaching:

All assessment taken on line are reviewed and discussed during the retreat. If you want additional interpretation or coaching on utilizing your skills and strengths, you may reserve additional one-to-one time. The investment for individual time is \$250.00 per hour and is typically scheduled on the last day of the retreat. Please let us know your preference when you register or during your retreat program. Individual coaching is scheduled on a first come first served basis.

### Referral Source:

How did you learn about or who referred you to Leaders Path™?

Would you like to receive our *free* e-newsletter?  No  Yes

**The Blake Group & Leaders Path Policies - Confidentiality and Privacy:** We recognize that part of the Leaders Path experience is confidential and private. The extent to which you want to protect your confidential writings, self assessments, and feedback will be your choice. It is our intent to provide a meaningful personal and professional development experience. We ask that participants do not break confidences or reveal information about other participants after attending a Leaders Path™ Coaching Retreat program. In addition, each participant's personal and professional information will not be sold, provided, or given to any outside agency, firm or business without your consent.

**Acknowledgment:** I have read, understand and agree to the Leaders Path™ policies. I have provided all information pertaining to my special needs including dietary, physical, and medical conditions.

As soon as you have registered and paid your program investment, we will send you your Leaders Path Workbook and instructions for completing your online assessments.

Thank you and we look forward to your participation in Leaders Path.

Participant's Signature: \_\_\_\_\_

Print Your Name Here: \_\_\_\_\_

Date: \_\_\_\_\_

Please email, fax, or mail your completed form to:  
The Blake Group, HC 1 Box 577, Elgin, AZ 85611-9729  
Email: [if@blake-group.com](mailto:if@blake-group.com)  
Fax: 520.455.9398