

Course Registration Form

Women of Spirit: Inspiring Foremothers

Name Address: _____

Email: _____

Phone: _____

Signature: _____

Registration: *Please send registration fee to this address:*

*Institute for Feminism and Religion,
30A Parkhill Rise, Kilnamanagh, Dublin 24*

Registration Fee:

Regular Fee: I enclose

Concession Rate: I wish to apply for the concession rate on the following grounds
.....:

I enclose