

## The Zufelt Experience MAIL/FAX Registration Form

**Live Participation Event on September 15-17, 2006  
Denver, Colorado**

Complete this registration form immediately and mail it in, or FAX it in. Or for faster registration, **call Ed Ernsting at 360-883-2175 (USA PST 10:00 a.m. – 2:00 p.m.)**

Mail Your Registration In	FAX Your Registration In
The Zufelt Experience Jack M. Zufelt 3228 East Phillips Dr. Centennial, Colorado 80122	The Zufelt Experience Fax Phone Number: 773-409-1649

100% Money Back Guarantee **“Better Thank Risk Free”** Offer. I understand that if I am not completely satisfied 100% by 2:00 p.m. the second day of The Zufelt Experience I can ask for my money back. No questions, No hassles, No hesitation! Plus, I get to keep the grounding materials for free.

- YES! Jack**, I want to participate in The Zufelt Experience live event September 15-17, 2006 in Denver, Colorado. I understand my single payment price is only **\$2,497!**
- PLUS...** I am bringing my spouse at no additional cost.

**Please complete the following information below:**

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Birth Date: \_\_\_\_\_

\_\_\_\_\_ **My check (in US funds) for \$2,497 Payable to Jack Zufelt, is enclosed.**

\_\_\_\_\_ **Please charge my ( ) VISA ( ) MasterCard ( ) Amex ( ) Discover Card**

Credit Card Number # \_\_\_\_\_ Exp Date: \_\_\_\_\_ CODE: \_\_\_\_\_

\_\_\_\_\_ Please distribute my charges to the following cards with the following amounts totaling \$2,497.

Amount \$ \_\_\_\_\_ Card Number One: # \_\_\_\_\_ Exp Date: \_\_\_\_\_ CODE: \_\_\_\_\_  
 TYPE CARD: ( ) VISA ( ) MasterCard ( ) Amex ( ) Discover Card

Amount \$ \_\_\_\_\_ Card Number Two: # \_\_\_\_\_ Exp Date: \_\_\_\_\_ CODE: \_\_\_\_\_  
 TYPE CARD: ( ) VISA ( ) MasterCard ( ) Amex ( ) Discover Card

Amount \$ \_\_\_\_\_ Card Number Three: # \_\_\_\_\_ Exp Date: \_\_\_\_\_ CODE: \_\_\_\_\_  
 TYPE CARD: ( ) VISA ( ) MasterCard ( ) Amex ( ) Discover Card

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