Biodynamics2024

ADVANCED BIODYNAMIC PRACTICES

A one day workshop for those who have been using the biodynamic preparations for at least one year and who wish to participate in a sharing of experiences and questions about biodynamics

Dugite Farm, Donnybrook, WA

Wednesday 27th April, 2011. 9am – 5pm

There is a growing number of biodynamic practitioners who are developing their knowledge, skills and practices in various fields of agriculture, horticulture and viticulture.

Advancing the development and evolution of biodynamics will be achieved through the sharing of these experiences and an expansion of understanding the profound role agriculture has in our culture and the future of life of the planet and its inhabitants.

This event will be participant oriented focussing on the questions and observations of those attending. Brett Kirkpatrick and Hamish Mackay will facilitate the event, hosted by Brett and Leonie Inger at Dugite Farm, Charley Creek Road, Donnybrook, WA.

We encourage, and look forward to, your participation.

Books will be available for sale

BOOKINGS: *02 6655 9853 office@biodynamics2024.com.au*

VENUE: **Dugite Farm, Charley Creek Road, Donnybrook, WA**

LOCAL CONTACT: **Brett Kirkpatrick and Leonie Inger 08 9731 8308**

COST: **$175 pp** or **$225 per couple** GST inc.
Morning & afternoon teas provided. ***Please bring lunch.***

ACCOMMODATION: Contact Brett for local accommodation options

Please register by Monday 25th April, 2011

ADVANCED BIODYNAMIC WORKSHOP REGISTRATION FORM – 27th April, 2011

Name/s			
Trading Name			
Address			
Town		**State**	**Post Code**
Telephone	**Mobile**		**Facsimile**
Email			

PAYMENT: Quick Registration – Fax credit card payment to 02 6655 9853

or post chq's & money orders to: 15 haydon Street, NORTH DORRIGO NSW 2453

payable to: BIODYNAMICS2024 Pty Ltd or direct deposit to: BSB 633-000 A/C 1368 80945

Total Amt Paid $_____ by **Cheque** **Money Order** or **Credit Card** ☐ **Visa** ☐ **MasterCard**

Card No. |__|__|__|__| |__|__|__|__| |__|__|__|__| |__|__|__|__| Expiry Date: _____ /_____

Name on Card: **Signature:**

Your contact details will be included in our participant contact list unless you indicate otherwise: ☐ please exclude my details