Biodynamics2024

BIODYNAMIC PREPARATION MAKING

Two days of making the biodynamic horn manure and compost preparations

Dugite Farm, Charley Creek Road, Donnybrook, WA

Thursday 28th & Friday 29th April, 2011. 9am – 5pm

Biodynamics is becoming recognised in australia as a practical approach to farming and gardening. Biodynamic farmers are achieving viability and quality while at the same time contributing to the development of an Agri-*Culture* we can respect and enjoy.

This workshop will be a practical, hands-on event making the biodynamic horn manure and compost preparations. It will include a sharing of experiences and an exploration of their purposes.

The workshop will be hosted by **Brett Kirkpatrick** and **Leonie Inger** with **Hamish Mackay** contributing his knowledge and experiences.

The biodynamic preparations are available for purchase through a number of biodynamic groups around Australia to assist people begin their journey into biodynamics, however, we encourage as many people as possible to become familiar with not only how to use them but how to make them. The formation of local groups who meet each spring and autumn to make the preparations and share their experiences will become an important feature of biodynamic wok.

Books will be available for sale
Accommodation: Contact Brett for local options

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:	**$270 pp** or **$400 per couple** GST inc. *Lunch, morning & afternoon teas provided.*

Please **register by 26th April, 2011**

PREPARATION MAKING WORKSHOP REGISTRATION FORM – 28 / 29 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