

KI USA Study Partner Request Form

If you would like to be added to the ***KI Study Partners List***, or have updates to your contact/participation information, please print the information below.

Name _____
(List your first and last name, but only your **first name** will be given to potential study partners)

Phone (____) _____ **E-mail** _____

Phone (____) _____

Address _____

City, State, Zip _____

Country _____

(Only your **city** will be given to potential study partners)

Meeting Preferences: Please indicate how you would like to “meet” with your study partners (check **all** that you are willing to consider):

- In person
- By telephone
- Via e-mail
- In a chat-room (online)

Note: You may request that your name be removed from the list at any time.
Just email your preference to office@kappelerinstitute.org.

I give permission for Kappeler Institute for the Science of Being, Inc. to provide my first name, city, phone number, e-mail address (as applicable), and meeting preferences to other individuals interested in joining study groups or finding study partners.

I agree to use the information I receive from KI USA only for the purposes of locating study groups and study partners, not for personal promotion or advertising.

Signed: _____ Date: _____

Return form to: Kappeler Institute, PO Box 99735, Seattle, WA 98139-0735