



The Power of Archetype: Integrating Astrology and Holotropic Breathwork

A Holotropic Breathwork™ Workshop

*With Mathew Stelzner Sparks, Diana Medina
and GTT staff*

Croydon Hall, Somerset, England

4th-9th September 2012

This workshop provides an overview of the essential elements for beginning your own astrological practice, and will show how astrology can be especially useful with Holotropic Breathwork. It is designed for both the absolute beginner as well as those who are quite skilled in astrology. We will be covering the following and more, using a variety of media, and including demonstrations from participants' charts and the charts of well-known events and individuals: 1. How astrology has influenced Stan and the breathwork, and how Stan's work has influenced astrology — astrological insight into perinatal matrices. 2. Using astrology for insight into challenging breathwork experiences. 3. Astrological archetypes experienced through film clips, and through music. 4. Astrological insight into 9/11 and our current moment in history. 5. Comparing the spiritual insights gained through astrology with other wisdom traditions. 6. How to read a chart and calculate transits.

Matthew Stelzner is a professional astrologer who has been practicing astrology in San Francisco for the last fifteen years. He practices a unique form of archetypal astrology which he learned from Richard Tarnas and Stanislav Grof during his years as a graduate student at the *California Institute of Integral Studies*. He has completed coursework both towards a Ph.D. in Humanities and towards an M.A. degree in counseling psychology. Matthew has worked for GTT in a number of capacities since he certified as a facilitator in 1998: giving readings to training participants, functioning as a staff member for the training, and also teaching the astrology module a number of times, both in the United States and internationally. He is currently a faculty member for the newly formed *Institute of Archetypal Cosmology*, which offers courses in archetypal astrology to students both in the San Francisco bay area and online. Matthew also hosts an internet broadcast called *Correlations: the Archetypal Astrology Podcast*, which is available through iTunes. For more information about Matthew and his work please visit his website at www.matthewstelzner.com

TRAVEL: Croydon Hall is situated just three miles from the North Somerset Coast on the edge of Exmoor National Park. Taunton, the county town of Somerset, is located about 35 minutes drive away with access to Intercity rail services, National Express coaches and the M5 motorway. A wide variety of detailed travel information is available on the [Croydon Hall website](#).

DATES & TIMES: We will begin with registration at 9:30 am on the first day, 4th September 2012. We will close with the end of the morning session on 9th September 2012 at approximately 12:30.

PROGRAM COST AFTER EARLYBIRD COST: **£730 (See below for lodging and meals) £600.**
To qualify for the earlybird rate, payment in full must be made by 4th July 2012.

ACCOMODATION and ACCOMODATION FEES: The accommodation price includes 5 nights retreat centre accommodation with organic meals from lunch, 4th September 2012 until lunch on 4th September 2012. The pricing below is per person. If you wish to arrive the night before the workshop begins please contact Croydon Hall directly for arrangements. A few single rooms may be available for additional cost. Roommate requests may be made to Croydon Hall when you register. If you don't have a request you will be matched with appropriate same gender roommate(s) from the GTT group.

To register for your room and meals, please contact Croydon Hall directly at info@croydonhall.co.uk or 9am-5pm on (UK) 01984 642200

ROOM TYPE (PRICE INCLUDES MEALS)	COST PER PERSON
CATEGORY A: DOUBLE/ TWIN en suite	£385
CATEGORY B: QUAD SHARE	£359
CATEGORY C: DORMITORY	£315

Note: a twin or double room used as a single will incur an additional fee. There is a limited number of single room availability.

Off site options at nearby B&B's are also available. Please contact GTT or Croydon Hall for a list.

GTT REGISTRATION & METHODS OF PAYMENT: Please send both registration and medical forms to GTT:

- 1) by email to gttuk@hotmail.co.uk
- 2) by fax to (UK) 01494792629
- 3) by postal mail to : Grove Farm, Grove Lane, Chesham, Bucks HP5 3QQ, England

Personal cheque or draft: May be made out to Holly Harman or Debbie Dunning and mailed to the address above.

Note for those outside the UK: If you wish to send a cheque or draft from a country that uses Euros or US dollars, **please contact us about the amount to send in those currencies.**

Electronic funds transfer: For information on making a transfer, please contact the GTT office by email gttuk@hotmail.co.uk or by phone (UK.) 01494 792629.

Credit cards: We accept Visa and Mastercard. Card number, expiration date, and 3-digit security code may be written on your registration form, and sent by fax or postal mail. **It is not safe to email credit card information.** We will add £20 for use of credit card, toward bank fees incurred. If you pay by credit card, the charge will be made in U.S. dollars equal to the exchange rate on the day charged, as determined by our bank. (<https://www.foreignexchangeservices.com/index.html?partnerid=FES&serviceType=rate>)

If you need more information, please contact us at gttuk@hotmail.co.uk

GTT REGISTRATION FOR Somerset, England, September 2012

Please send workshop registration forms and payment to:
 Grof Transpersonal Training, 3 Grove Farm Cottages, Grove Lane, Chesham Bucks HP5
 3QQ or gttuk@hotmail.co.uk

NAME	
ADDRESS	
CITY/CODE COUNTRY	
EMAIL	
PHONES	mobile: _____ home: _____

I AM ENCLOSING:

£300 deposit OR FULL PAYMENT of:	
Credit card fee £20 Wire transfer fee £10	
TOTAL AMOUNT	£ _____

***For early registration fee, full payment must be made by 4th July 2012**

If you are not using early registration discount, you may reserve your place with a £300 deposit.

***Please read cancellation policy below**

IF PAYING BY CREDIT CARD, CREDIT CARD NUMBER:

_____ - _____ - _____ - _____

EXPIRY DATE: ____/____ 3 DIGIT SECURITY CODE (REQUIRED): _____

PLEASE READ AND SIGN THE FOLLOWING. YOUR SIGNATURE IS REQUIRED FOR REGISTRATION.

CANCELLATION POLICY: £50 of your payment is a non-refundable processing fee. The balance of your payment is refundable, upon cancellation in writing, until **August 4th**. **After August 4th**, £300 of your payment is non-refundable, and the balance may be credited toward a future module, minus any fees GTT has been charged by the retreat centre on your behalf for room and meals.

SUBSTANCE USE POLICY: Use of any non-prescription drugs or other illegal substances is not permitted during the training or at the training site. Anyone using such drugs or substances during the training module or at the training site will not be allowed to attend the training.

I have read and understand the above cancellation policy and substance use policy.

Signature & Print Name

Date

FOR GTT USE:

Date form received:

Med form ok: Y/N

Date payment processed:

Confirmation letter sent: Y/N

Medical Form for Holotropic Breathwork

Breathwork is intended as a personal growth experience and should not be looked upon as a substitute for psychotherapy. Holotropic Breathwork can involve dramatic experiences accompanied by strong emotional and physical release. This workshop is not appropriate for pregnant women, or for persons with cardiovascular problems, severe hypertension, some diagnosed psychiatric conditions, recent surgery or fractures, acute infectious illness or epilepsy, or active spiritual emergency.

If you have any doubt about whether you should participate, it is essential that you consult your physician or therapist as well as the workshop organizers before attending.

The answers to the following questions are to assist your facilitators and will be kept strictly confidential. Please answer all questions as completely as possible.

1. Do you have a past history of, have been diagnosed with, or are currently experiencing, any of the following:

	YES	NO
A) Cardiovascular disease, including heart attacks and any cardiovascular surgery	_____	_____
B) High blood pressure	_____	_____
C) Diagnosed psychiatric condition	_____	_____
D) Recent surgery	_____	_____
E) Past or recent physical injuries, including fractures or dislocations	_____	_____
F) Present or current infectious or communicable diseases	_____	_____
G) Glaucoma	_____	_____
H) Retinal detachment	_____	_____
I) Epilepsy	_____	_____
J) Osteoporosis	_____	_____
K) Asthma (If yes, please bring your inhaler to the workshop)	_____	_____
2. Are you currently pregnant?	_____	_____
3. Have you been hospitalized in the past 20 years for significant medical issues?	_____	_____
4. Have you ever been psychiatrically hospitalized?	_____	_____
5. Are you currently in therapy or involved in any type of support group?	_____	_____
6. Are you currently taking any type of medication? Describe on back.	_____	_____
7. Is there anything else about your physical or emotional status we should be aware of?	_____	_____
8. Emergency contact : name _____ phone _____		

If you answer "yes" to any of these questions, it is essential that you explain your answer on the back or on an attached page.

This medical form must be received by your workshop organizer as part of your registration. We cannot send your confirmation letter until we've received your medical form

PLEASE READ AND SIGN THE FOLLOWING STATEMENT:

I hereby confirm that I have read and understood the above information, and have answered all questions completely and honestly, and have not withheld any information. My general health, as far as I am aware, is good.

Signature & please also print your name Age Gender Date

I have experienced Holotropic Breathwork before: Y or N ____