



KRI



20 Classes and Intensive Meditation for Student-Teachers

Legal Name (Last, First) _____

Spiritual Name _____

1. Date Completed: _____ Signed: _____

2. Date Completed: _____ Signed: _____

3. Date Completed: _____ Signed: _____

4. Date Completed: _____ Signed: _____

5. Date Completed: _____ Signed: _____

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17. Date Completed: _____ Signed: _____

18. Date Completed: _____ Signed: _____

19. Date Completed: _____ Signed: _____

20. Date Completed: _____ Signed: _____