



THE DC METRO VILLAGE WITH MALIDOMA & ASSOCIATES PRESENTS
DAGARA ELEMENTAL RITUAL INTENSIVE 2006
AWAKENING THE SHAMAN WITHIN
FOR PEOPLE OF AFRICAN DESCENT

With Dr. Malidoma Patrice Somé

Much of the pain isolation and wounding we feel in our communities are the result of our being cut off from the many energies and spirits that form a part of our lives. The Dagara people of West Africa have sustained the ancient tradition of living in community with the ancestors and in deep relationship with nature.

This series will provide an introduction to the core healing practices of the Dagara, bringing them to life through five powerful rituals. We will join together to rekindle our bone memory of our Ancestors and re-learn how to live in relationship with them. We will address the healing potential of community and the place of ritual.

Required reading for this series is Malidoma Somé's book – The Healing Wisdom of Africa.

ABOUT MALIDOMA SOME

Malidoma Patrice Somé is a fully initiated Shaman of the Dagara Tribe of West Central Africa, and the holder of two PhD's from the Sorbonne in Paris and Brandeis University in Boston. Malidoma teaches the medicine of Mother Nature, how to recreate the natural instinct in the souls of people, to reopen their eyes to see the sacred, unhampered by modernism. It is a context in which medicine, healing, and a re-acquaintance with the old can take place. Malidoma tries to accomplish this by working with people to help them implement new ideas to form communities founded in spirit; communities where the flavor of indigenous wisdom prevails through a rediscovery of the magic of nature.

Please know that while Malidoma will be present at each gathering providing knowledge, guidance, and direction to the group; he will share much of the facilitation of the logistics of each session with assistants (those who have studied with Malidoma and who are deepening their experience in this work).

ELEMENTAL RITUAL INTENSIVE PROGRAM
SEPTEMBER 7TH -10TH 2006

<i>Fire Ritual</i>	Thursday September 7th 2006
<i>Water Ritual</i>	Friday September 8th 2006
<i>Earth Ritual</i>	Saturday September 9th 2006
<i>Nature & Mineral Rituals</i>	Sunday September 10th 2006

START & END TIMES

The weekend element ritual program will begin with night arrivals and registration on Wednesday at 6:00 pm the ritual site in Victoria, VA. Each Ritual day will begin with a 9:00 am lecture by Malidoma Some, and will continue throughout each day with the building of the shrines, shrine prep, ritual sacrifice, and ritual. The Elemental Ritual Intensive will be complete on Sunday evening.

LOCATION

The elemental ritual program will be held at Nature's Friend Campground and Retreat Center in Victoria, VA. www.naturesfriend.org

ACCOMMODATIONS

You may select either cabin or tent camping accommodations. A limited number of cabins are available on a first come, first serve basis. Tents and other camping equipment must be provided by attendees.

FEE

The registration fee is \$695.

Group Discount: \$45 off for each registration in groups of 10 or more.

You can anticipate additional costs for transportation to meeting sites and personal items. The registration fees do not include these costs. The registration fees includes: Room & Board, Ritual Essentials, Lectures, Ritual Supplies, Workshops, and Banquet. Room & Board covers basic outdoor amenities in a camp-like setting.

HOW TO REGISTER

You can register with a deposit of \$250 and agree to the following payment schedule:

- \$350 by August 31, 2006
- \$95 by September 7, 2006

To register, complete the registration form below; enclose with it your payment.

Make check or money order payable to: **ESC**

Mail payment to: **Malidoma & Associates**
 4200 Wisconsin Ave., NW Suite 106-131
 Washington, DC 20016

*If possible, please pay the entire cost on registering; this helps our efficiency. **Please note that the total tuition must be paid in full at the commencement of the program.** Registrations will be processed on date received. Confirmation will be mailed or emailed as soon as your registration has been processed. Please allow up to two weeks for this.*

WAIT LIST

If this program is full, you will be placed on a wait list in the order in which your registration was received and notified if an opening occurs. If you do not get into this program, your payment will be refunded in full.

CANCELLATIONS & REFUNDS

If after you register you need to cancel your registration, please contact us as soon as possible. The cancellation fee is \$50 if the request is made before or August 31st. For requests made after August 31st, the cancellation fee is \$250.

CONTACT INFORMATION

If you have questions, or need further information please email amensa@houseofngolo.com or call 301.792.0225.

Ashe!

The 2006-2007 DC & Metropolitan Area Village Planning Committee

4200 Wisconsin Avenue, NW
Suite 106-131
Washington, DC 20016

www.dcdagaravillage.com



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REGISTRATION FORM

Name _____ [] Male [] Female

Address _____

City _____ State _____ Zip _____

Day Phone _____ Evening Phone _____

E-mail Address _____

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[] I understand that this program is designed as a five part intensive of rituals and it is my intention in registering to be present all five rituals.

[] I have read and fully understand the refund policies for this program.

[] Meat-Eating [] Vegetarian [] Vegan [] Raw Food

[] Enclosed is my Check/Money Order in the amount of \$_____ I agree to pay the balance of \$_____ by _____, 2006.

Make payment to: **ESC**

Mail payment to: **Malidoma & Associates**

4200 Wisconsin Ave., NW Suite 106-131

Washington, DC 20016

Please note that a Liability Waiver will be filled out by all participants . Youth under 21 must be accompanied by an Adult or have a signed waiver by Guardian.

Signed _____ Dated _____, 2006.

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Name _____

SPECIAL NEEDS

Medical Needs _____

Special Dietary Needs / Food Allergies _____

Other _____

IDENTIFY YOUR CLAN _____

Attendees will participate in elemental rituals along with the other members of their clan

Clan:	Earth	Fire	Water	Mineral	Nature
Birth Year Ending in:	0 or 5	2 or 7	1 or 6	4 or 9	3 or 8

ACCOMMODATION PREFERENCE

Cabin _____ Tent _____

Please Note: A limited number of cabins are available on a first come first serve basis. Tents and camping equipment must be provided by attendees.

EMERGENCY CONTACT INFORMATION

Primary Contact Name _____

Phone 1 _____ Phone 2 _____

Address _____

City, ST _____ Zip _____

Secondary Contact Name _____

Phone 1 _____ Phone 2 _____

Address _____

City, ST _____ Zip _____