Lucid Dreamz Astro — Reading Request Form

Fill out and save or email back. Readings are delivered via PDF (email).

| Instagram (optional) Date of Birth (MM/DD/YYYY) Place of Birth (City, State/Region, Country) 2. Reading Type | ull Name | | | Email | | |
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| Birth Chart PDF Reading — \$20 Solar Return PDF Reading — \$20 Single Common Solar Return PDF Reading — \$20 Singl | nstagram (opt | tional) | | Date of Birth (I | MM/DD/YYYY) | |
| Birth Chart PDF Reading — \$20 Solar Return PDF Reading — \$20 Single Color Tarot — Choose a topic (optional) General Guidance Love / Relationships Dreams / Subconscious Career / Purpose Other: 1. Reflection What are you hoping to understand or bring clarity to through this session? 5. Consent & Signature understand that readings are for spiritual and educational purposes only and are not a substitute for medical or ment | ime of Birth (| include AM/PM & t | imezone if known) |) Place of Birth (| (City, State/Region, Country) | |
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| Career / Purpose 4. Reflection What are you hoping to understand or bring clarity to through this session? 5. Consent & Signature understand that readings are for spiritual and educational purposes only and are not a substitute for medical or ment | Birth Chart 3. If Tarot – | t PDF Reading — S – Choose a top | \$20 oic (optional) | Solar Return PDI | F Reading — \$20 | Single Ca |
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