

Booking Form

Your Details

Name	
Please <u>underline</u> surname	_____
Address (including postcode)	

Email _____	Occupation _____
Daytime telephone _____	Evening telephone _____
NLP Experience _____	
How did you hear about us? _____	

Courses						
Please indicate which course or courses you are applying for including preferred dates (see events page for calendar schedule)						
Course Title	Number of days	Investment	Preferred dates			All bookings are provisional and subject to terms and conditions
			1 st Choice	2 nd Choice	3 rd Choice	
NLP 101 (Diploma pt1)	1	Free				
NLP Diploma (pt 2)	3					
NLP Practitioner	12					
NLP Master Practitioner	12					
NLP Trainer's Training	15					

Health Declaration

We need some information that will be held in the strictest confidence. It is important that you read, fill in, sign and return this form to us; it is a prerequisite for being accepted on the course. Thank you.

Are you in good physical health?			Yes		No
Do you suffer from or have you ever suffered from the following?					
	Asthma or bronchitis		Yes		No
	Clinical Depression		Yes		No
	Epilepsy		Yes		No
	Heart condition		Yes		No
Are you taking any prescribed medications?			Yes		No
If yes, please give details here:					
Have you ever been under a doctor's care for a psychiatric condition?			Yes		No
Do you suffer from any physical disability or psychological condition that could prevent full participation in an active study programme?			Yes		No

Declaration

I understand that the training I receive is for educational purpose only and that it is not a substitute for proper medical or psychological treatment. If I suspect or know that I am suffering from any physical or psychological ailment or condition, then I will seek appropriate medical or psychological treatment before attending GWiz NLP programme.

I understand that this training does not represent a qualification in hypnosis or hypnotherapy or stage hypnosis and that I will not claim or imply that I have been certified approved in any of these areas by GWiz NLP.

I understand that I will need to attend all sessions in order to qualify.

I have read the application and declaration, truthfully completed all relevant portions and I understand and agree to the terms.

Signature _____ Print Name _____ Date _____