

Diploma in Clinical Hypnotherapy

Booking Form

Name:

Address:

..... Post Code:

Phone: Landline Mobile

Email: Date of Birth:

Occupation:

Prior training/experience in related fields:

.....

Please book place(s) on the following courses:

Intensive Course (please tick)

Weekend Course (please tick)

**PAYMENT: The total tuition fee for the course is £1,800.00.
(*£1,600 early bird discount weekend course only)**

I enclose a deposit of **£200.00**. I understand this deposit is refundable only if I am not accepted on the course or the course is cancelled. Cheques should be made payable to **Skills24 Training**. If you wish to pay by card please ring the office on 01889 808065.

I agree to pay the balance of £1,600 at least 14 days prior to enrolment unless other arrangements have been made (*£1,400 early bird discount).

If you wish to pay by Bank Transfer our details are as follows:

Sort Code: 77-31-10 Account No. 28259260 Name: Skills24 Training

I confirm I have read and accepted Skills24/Central Academy of Clinical Hypnosis & NLP Training Terms and Conditions.

I also enclose the Health Check Questionnaire which I have signed.

Signed..... Date

Please send the completed booking form together with deposit to: D. Woolley, 16 Manor Farm Road, Little Haywood, Stafford ST18 0NW