

# WELLNESS FOR LIFE ENROLMENT FORM

Send this completed form, together with your cheque (made payable to Laurel Alexander) to Wellness for Life, 101 Osborne Road, Brighton, Sussex BN1 6LW. If you would like to pay online using PayPal or your credit card, please pay online, complete this form and send with a covering note. If you would like to pay by BACS or standing order, please contact Laurel at [www.laurelalexander.co.uk](http://www.laurelalexander.co.uk) to make arrangements.

## Qualifications (please tick your choice):

- |  |   |
|--|---|
| <input type="checkbox"/> Diploma in Life Coaching Skills       | <input type="checkbox"/> Diploma in Wellness Coaching Skills    |
| <input type="checkbox"/> Diploma in Stress Management Coaching | <input type="checkbox"/> Diploma in Bach Flower Remedies        |
| <input type="checkbox"/> Reiki I Certificate                   | <input type="checkbox"/> Reiki II Certificate                   |
| <input type="checkbox"/> Reiki III (ART) Certificate           | <input type="checkbox"/> Reiki III (Master/Teacher) Certificate |
| <input type="checkbox"/> Certificate in Counselling Skills     |   |

## Bespoke Workshops (please tick your choice):

- |   |  |
|---|--|
| <input type="checkbox"/> Astrology        | <input type="checkbox"/> Crystal Healing     |
| <input type="checkbox"/> Tarot Reading    | <input type="checkbox"/> Writing Non-Fiction |
| <input type="checkbox"/> Reiki Share Days |  |

## Distance Learning (please tick your choice):

- |   |   |
|---|---|
| <input type="checkbox"/> Australian Bush Flower Essences    | <input type="checkbox"/> Bach Flower Remedies             |
| <input type="checkbox"/> Certificate In Mindbody Healing    | <input type="checkbox"/> Certificate in Stress Management |
| <input type="checkbox"/> Imagery for Health                 | <input type="checkbox"/> Wise Woman Natural Healing       |
| <input type="checkbox"/> Introduction to Counselling Skills | <input type="checkbox"/> Introduction to Life Coaching    |
| <input type="checkbox"/> Introduction to Wellness Coaching  |   |

## Fees (please tick your choice):

Please tick one of the following:

- |   |   |
|---|---|
| <input type="checkbox"/> Complete fee with discount | <input type="checkbox"/> Three installments |
| <input type="checkbox"/> Monthly installments       | <input type="checkbox"/> Cheque             |
| <input type="checkbox"/> Standing Order             | <input type="checkbox"/> BACS               |
| <input type="checkbox"/> Online                     |   |

**NAME:**

**ADDRESS:**

**TELEPHONE:**

**EMAIL:**

**MOBILE:**

**DATE OF BIRTH:**

**AGE:**

**EDUCATIONAL BACKGROUND**

**Where**

**When**

**Exams**

**FURTHER AND HIGHER EDUCATION**

**Where**

**When**

**Exams/qualifications**

**COMPLEMENTARY HEALTH QUALIFICATIONS**

**Where**

**When**

**Qualifications**

**OCCUPATIONAL HISTORY**

**Where**

**When**

**Brief Job Description**

**WHICH COURSE ARE YOU APPLYING FOR AND WHAT ATTRACTED YOU TO IT?**

**WHAT HAS BEEN YOUR EXPERIENCE OF ASSIGNMENT WRITING, JOURNALING AND RESEARCH?**

**IN WHAT WAYS WOULD YOU EXPECT COMPLETION OF THIS COURSE TO BENEFIT YOUR PERSONAL AND PROFESSIONAL LIFE?**

**WHERE DID YOU HEAR ABOUT THIS COURSE?**

**SIGNATURE: DATE:**

<b>OFFICE USE</b>	<b>COURSE</b>	<b>START DATE</b>
<b>1st INSTALMENT DATE</b>	<b>2nd INSTALMENT DATE</b>	<b>3rd INSTALMENT DATE</b>