

Instant Hypnosis Workshop

Workshop Date _____

Workshop Venue: Dublin ____ *Galway*____

Name _____

Address _____

Tel: _____ **Mobile:** _____

Email: _____ **Nationality** _____

Reason for doing this Workshop _____

Current Occupation: _____

Previous Hypnotherapy Training (if applicable) _____

Do you have or have you been diagnosed with any serious physical or psychiatric illness?
Yes/No If Yes please give details

Have you ever been convicted with or charged with a criminal offence and/or have you ever served a prison sentence?

Yes/No If Yes please give details

FEES

I enclose a deposit of 100 euro towards the full workshop fee of 397 euro. I understand that this deposit is non-refundable except in the case where I am not accepted on to the course or the course is postponed to a future date.

Cheques made payable to Mr Seamus Mahon *or* Bodywatch Ltd.

I declare that the above information is true and correct. I understand and agree that acceptance of my application is at the discretion of the organizers and that no reason need be forthcoming if my application is not accepted. I understand that the remaining balance of the workshop fee is payable in full at least five days in advance of the workshop date.

Signed: _____ **Date:** _____

Please send this completed application form with the workshop deposit to Mr Seamus Mahon, Gortinleive, Newtowncunningham, Co. Donegal *or* to Niamh Flynn, Bodywatch Ltd., Suite 29, Floor 2, The Galway Clinic, Doughiska, Galway.

Payment Choices

Payment by cheque – Please make cheques payable to Mr Seamus Mahon *or* Bodywatch Ltd. and send to: Mr Seamus Mahon, Gortinleive, Newtowncunningham, Co. Donegal *or* to Niamh Flynn, Bodywatch Ltd., Suite 29, Floor 2, The Galway Clinic, Doughiska, Galway.

Payment terms and conditions

Mr Seamus Mahon and Bodywatch Ltd reserve the right to change times and venues. If the course is cancelled or postponed then those attending will be refunded their deposit paid but neither Mr Seamus Mahon nor Bodywatch Ltd will be liable for any additional expenses incurred by attendees.

Seamus Mahon Tel: 077 31171187

Niamh Flynn Tel: 091 720145

This application form must be completed in full and signed and delivered by post only