

**NGH Hypnotherapy Certification Practitioner Course**

**Dublin, Ireland, Commencing October 2010**  
**Charleston, South Carolina, USA, 2011 Dates TBC**  
**Galway, Commencing March 2011 Dates TBC**

Dublin Course \_\_\_\_\_ South Carolina Course \_\_\_\_\_ Galway Course \_\_\_\_\_

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Tel: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_ Nationality \_\_\_\_\_

Reason for doing this course

Education to date:

\_\_\_\_\_  
\_\_\_\_\_

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

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**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

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**Who was your contact regarding the course?**

**Niamh** \_\_\_\_\_ **Rory** \_\_\_\_\_ **Stephen** \_\_\_\_\_ **Other** \_\_\_\_\_

**FEES**

I enclose a deposit of 300 euro. I understand that this deposit is non-refundable except in the case where I am not accepted on to the course.

I agree to pay the balance of fees in full by the first day on which the course for which I am registered commences.

Cheques made payable to Bodywatch Ltd.

I declare that the above information is true and correct and that if I am accepted on to the course I will pay the balance in full as agreed. I understand and agree that acceptance of my application is at the discretion of Bodywatch Ltd and that no reason need be forthcoming if my application is not accepted.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please send this completed application form to Niamh Flynn Suite 29 Floor 2 The Galway Clinic, Doughiska, Galway, Republic of Ireland

**Payment Choices**

Payment by cheque – Please make cheques payable to Bodywatch Ltd and send to: Suite 29 Floor 2 The Galway Clinic, Doughiska, Galway. Republic of Ireland

\*less discount if applicable

**Payment terms and conditions**

A non-refundable deposit of 300euro is required with the application form.. The balance of the fee must be made at least 10 days prior to commencement of the course. Bodywatch Ltd reserve the right to change times and venues. If the course is cancelled then students will receive a full refund but Bodywatch Ltd will not be liable for any additional expenses incurred by students.

Bodywatch Ltd. Suite 29 Floor 2, The Galway Clinic, Doughiska, Galway, Ireland

**Tel:** 091 720145 **Fax:** 091 720146

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