

By The Bay Kinesiology

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TRAINING / WORKSHOP ENROLMENT FORM

Name: _____

Address: _____

Suburb: _____ Pcode: _____

Telephone (Hm/Wk): _____ Mobile: _____

Email Address: _____

How did you hear about me? _____

Training/Workshop: _____

Training Date(s): _____

Certificate name: _____

(Please use large block letters to print your name as you would like it to appear on your Attendance Certificate.)

Name of Training/Workshop	√	Hours	Fee	Office use only
Touch For Health 1 Training		16	\$330.00	Date rec'd
Touch For Health 2 Training		16	\$330.00	Invoice #
Touch For Health 3 Training		16	\$330.00	Amount \$
Touch For Health 4 Training		16	\$330.00	
TFH Workbook (compulsory for proficiency)		60	\$121.00	
Touch For Health Metaphor Training		16	\$350.00	
Touch for Health Proficiency (inc. \$55 Workbook marking fee & \$50 IKC Fee)		16	\$455.00	
Kinesiology for Kids Workshop		3	\$90.00	
Eat Right, Live Right Workshop		3	\$90.00	
Meridian Balancing Workshop		14	\$300.00	
Chakra Healing Workshop		7	\$150.00	
Natural Remedies Workshop		6	\$150.00	
Healthy Pets Workshop		7	\$150.00	
Credit card transaction fee – 4.2%		-		
TOTAL				

For further details on the above training please visit www.bythebaykinesiology.com.au

Please note: Your place will not be held until the deposit is paid in full.

Payment

Deposit of \$_____ paid by cash chq m/order EFT credit card

Balance of \$_____ paid by cash chq m/order EFT credit card

Please make cheques or money orders made payable to "Denise Robinson".

Card Type: Visa / Mastercard (Fee of 4.2% applies to all Visa & Mastercard transactions.)

Card name: _____ Signature: _____

Card number: _____ Expiry: ____/____ Amount: \$_____

Deposit is non-refundable unless trainer cancels.

I agree to abide by the conditions of enrolment and training requirements.

Signed: _____ Date: _____