HYPNOSIS & EMOTIONAL FREEDOM CENTER

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NGH HYPNOSIS CERTIFICATION TRAINING - REGISTRATION FORM

NAME:		DATE:			
ADDRESS:		DOB:		Age:	Sex: M F
CELL PHONE:	HOME PHONE:	EMAIL:			
FAMILY:	No. Of Children:	Siblings:	blings: Spouse/Significant Other:		
OCCUPATION:	EDUCATION:	EMPLOYER:			
Has anyone tried to hypnotize you?	For what reason?		Do you beliced?	you believe you were notized?	
Other alternative interests, modalities or trainings:					
Reasons for wanting this training:					
Have you ever been convicted of a felony?					
Do you agree to comply with the NGH Standards of Practice and Code of Ethics? http://www.ngh.net/Downloads/CodeEthicsStandards.pdf					
HOW TO REGISTER					
STEP #1: Return this form and NGH materials Payment to hypnosis3@gmail.com . STEP #2: We will send you an Invoice for the Registration Fee of \$200 STEP #3: Once you submit payment by Zelle (Best), Credit Card, Check or Cash, your seat in the class is held for you.					
Training is held on selected weekends from 10:00 to 4:00.					
TUITION - PAYMENT PLANS - DISCOUNTS					
TUITION \$1,900 – Winter 2019 Tuition					
PAYMENT OPTIONS: Zelle; Credit Card; Cash; Personal Check OPTIONAL PAYMENT PLANS of 2 or 3 Payments prior to graduation.					
I am making Full Payment now. () My Payment Plan Will Be Made In () Installments.					
IN CASE OF EMERGENCY					
Name of local friend or relative:	Relationship:	Home Phone	۵۰	Cell Pl	ione:
rame of focal friend of Telative:	Relationship.	Home Filon		Cell PI	
The above information is true to the best of my knowledge.					
Signature:		Date:			