**(As spelt on accreditation)**

|  |  |
| --- | --- |
| **Full name:** |  |
| **Preferred Name:** |  |
| **Program Start Date & Location:** |  |
| **Tuition:** | $ |
| **Phone:** |  |
| **Email:** |  |
|  **Address:** |  |
|  **I have the following**  **accreditation/degree/diploma:** |  |
| **Current Employment Position:** |  |
| **Desired Employment Position:** |  |
| **Previous NLP qualifications:** |  |
| **Experience in similar modalities:** |  |
| **I would like to be an NLP Practitioner/Master because:** |  |
| **I intend to use NLP for:** |  |
| **I have attended the following Elite events /sessions/training:** |  |
|  **I have experienced the following** **spiritual/personal development**  **or Accreditation outside of Elite:** |  |
| **I am willing to be coached. A previous example of this is:** |  |
| **I describe my public speaking skills as:** |  |
| **I describe my reading and writing skills as:** |  |
| **I agree to terms & conditions:** |  I have read T&C overleaf and agree No I do not agree |
| **Date of this application:** |  |
| **PAYMENT OPTIONS :** |  |
|  **Receipt number for full course payment via bank transfer**. Bank Transfer to: Candice Wright **BSB:** 086 006 **ACC:** 30 757 7728 (**Please enter your name** as the payment reference). |   |
| **Please call me to arrange a payment plan From my card** (2.2% square fees apply.)**Best time to call:** |  |
|  |  |
| **Who referred you to Elite NLP training academy:** |  |
| **Signature:** |  |
| **Date:** |  |

Once complete mail to: Candice Wright | Elite NLP Training Academy | 0422086627 | Mail.to.Elite.NLP@gmail.com