

STUDENT ENROLMENT FORM

PLEASE COMPLETE APPLICATION AND RETURN

Full name: (As spelt on accreditation)	
Preferred Name:	
Program Start Date & Location:	
Tuition: (Total is to include 20% administration fee on top of tuition if you have opted for a payment plan.)	
Phone Number & Best time to call:	
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 have the following needs:	
(Ease of access, vision support, audio support, food allergies, physical or mental health concerns. Please make all requests a minimum of 14 days prior to the program so that we can ensure appropriate resources and venues. Requests during a program may not be fulfilled due to venue booking terms and preparation time constraints on learning materials.)	
I agree to terms & conditions:	I have read T&C overleaf and agree No I do not agree
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 (20% Administration fee on top of tuition on payment plans)	
Best time to call:	
Who referred you to Elite NLP training academy:	
Signature:	
Date:	