

APPLICATION FORM

For

AURICULAR ACUPUNCTURE FOR DRUG & ALCOHOL REHABILITATION

Name

Address

Post Code..... Tel.....

email..... Date of Birth

Occupation.....

Place of work

Professional qualifications.....

Professional interests and specialisation

I apply to book a place on the course starting

I enclose a £100.00 non refundable deposit which will be deducted from the full cost of the course, or returned if I am not accepted on the course.

Signature.....

Date.....

Please make cheques and postal orders payable to Dragomir Lubomirov.

Please send the application form and the deposit to: Dragomir Lubomirov

4 Chelmsford Close • Hammersmith • London W6 8HU