

Enrolment Form NLP Highland – Course Name .....

*(please note Diploma, Practitioner and Master Practitioner have a separate form, if it's not apparent on the site, please email us for that form – thank you)*

Date(s).....

Name ..... Date of Birth .....

Address .....

.....Postcode .....

Tel. No. home .....

Mobile no. ....

Email address .....

**Person we can contact in case of an emergency**

.....Relation to you .....

Their tel. no. ....

**GP contact details**

Name .....

Phone no. ....

**Anything we need to be aware of:** e.g. medical condition, allergy, special diet?

.....  
.....

By signing below, I confirm that have not in the past 5 years have been treated for, and am not currently undergoing any treatment for any psychological disorders.

Signed in agreement .....

Please also print name ..... Date .....

***Please return to the address below.***