

# Booking Form



## Student Details

Name .....

Address: .....

.....

e-mail: ..... Telephone : ..... Mobile : .....

Where did you hear about the course?

If you have any special requirements please specify:-

I have a VTCT lifetime membership (only applicable for VTCT courses) yes / no

## Course Required (Please specify):-

Please specify the course and start date you require:-

Reflexology Diploma (VTCT)	<input type="checkbox"/>	Aromatherapy Diploma (VTCT)	<input type="checkbox"/>
Massage Diploma (VTCT)	<input type="checkbox"/>	Aromaflex	<input type="checkbox"/>
Reflexology for Conception	<input type="checkbox"/>	Indian Head Massage (VTCT)	<input type="checkbox"/>
Hopi Ear Candles (VTCT)	<input type="checkbox"/>	Foot Care (VTCT)	<input type="checkbox"/>
Healthy eating	<input type="checkbox"/>	Healthy Eating (AoR Accredited)	<input type="checkbox"/>
First Aid	<input type="checkbox"/>	Other (Please state): _____	

## Payment (Please specify):-

- I enclose £                      payment by cheque, payable to Calming Influences Ltd.
- I have paid £                      into the Calming Influences bank account. (Sort Code: 09-01-52  
Account Number: 08719687; Bank: Santander)

Full payment for all courses should be included except where stated specifically. We do not give refunds unless the course you require is not available, or is cancelled by Calming Influences. However, as long as you cancel your place within 7 days of the course start date, you will be able to transfer any monies paid to an alternative Calming Influences courses.

Signed:..... Print Name..... Date:.....

Booking forms should be returned to Calming Influences Ltd, Oakside, Bursledon, Southampton, So31 1BH or e-mailed to [training@calminginfluences.com](mailto:training@calminginfluences.com)