



EQUILIBRIUM CHINESE MEDICINE

Tuina Massage Course Application Form

Applicant Details:

First Name: _____ Surname: _____

Date of Birth: _____ Gender: _____ Nationality: _____

Address:

Telephone: _____ Email: _____

Profession & Related Existing Qualifications:

How did you hear about this course? _____

I wish to submit my application with:

A non-refundable 10% deposit - £150 Y/N

Payment in Full - £1500 Y/N

Payment can be made by BACS transfer or PayPal.

By completing this application, you consent to your information being stored by Equilibrium Chinese Medicine. In line with GDPR, your private and personal information is kept secure and is not shared with any 3rd Party.

Signature: _____

Date: _____

Equilibrium Chinese Medicine
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