



# WAIKATO SCHOOL OF REFLEXOLOGY

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## APPLICATION FORM Introduction to Reflexology - Short Course

SURNAME:..... FIRST NAMES:.....  
(Complete as you wish to see your name on your certificate)

DATE OF BIRTH:.....

STREET ADDRESS:.....

SUBURB:..... CITY:..... POSTCODE:.....

CONTACT PHONE:..... MOBILE:.....

EMAIL:..... FAX:.....

### PAYMENT

**Course fee \$250.00 payable with enrolment.**

**Applications close 28 February 2010**

- I enclose a cheque for \$250.00 payable to Waikato School of Reflexology
- I have paid the \$250.00 course fee by internet transfer  
to National Bank Account 06 0459 0095189 00. Use your name and WSR as the reference.

Signed:..... Date:.....