



Return completed form to: info@transforminst.com

Places will be confirmed and joining instructions supplied on payment of the appropriate fee (see NLP COURSE INFO on website at: <https://www.transforminst.com/pages/nlp-licensed-coach>). Please state which course(s) and preferred dates of attendance you are registering for and tick in the box below to confirm the payment option (refer to the table supplied on the website. Our Diploma/Advanced Diploma Graduates receive a discount of AED 1,000 on the published rates.

COURSE(S) I wish to take and preferred dates: _____

PAYMENT OPTION(S) 1. FULL PROGRAMME 1(a) FULL PROGRAMME BY INSTALMENTS*

* We will contact you to arrange the signing of the Instalment Agreement and supply of Post-Dated cheques.
See website for details of options and fees.

2. NLP Practitioner only 3. NLP Master Practitioner only 4. BOTH NLP Prac & Master Prac

5. Coaching Foundations only **Paying as an Earlybird (at least 2 weeks before course start date(s))**

TOTAL FEE PAID: Date paid:..... by cash cheque bank transfer

COURSE FEES fully incl. of lunches & refreshments, Course Manual and for NLP Practitioner, Master Practitioner and Licensed Coach, Certification from Society of NLP signed by Dr Richard Bandler, worth \$200 per Certificate).

Payment in full by bank deposit or transfer (see over page). Cheques payable to: **Dr Leila Edwards**

REFRESHERS: If you completed your NLP Practitioner/Master Practitioner training with us, you can repeat some or all of the course(s) and pay just AED 1,300 to cover the cost of overheads, subject to availability of space.

If you completed your NLP Practitioner Course elsewhere please contact us to arrange for an assessment.

PERSONAL DETAILS Please give your name as shown on your passport

Title (Miss/Ms/Mrs/Dr/Other): First/Given Name(s):..... Preferred Name/Nickname:.....

Family/Last Name: Profession:.....

Date of Birth (dd/mm/yy) Citizenship/Nationality: Passport or ID Card No:.....

Country of Birth:..... Email address(es):

Tel: (Day).....(Mobile).....(Evening).....(Fax).....

Mailing Address: City: Country:

Where/How did you hear about this course?

Please give details of any relevant training you have already completed, e.g. Introductory NLP, Hypnotherapy, EFT, or other courses:

Please give your reasons for wanting to take this course and state how you intend to use the skills you learn:

Please indicate if you have any special needs due to disability or medical condition:

Signature: Date:

Acceptance of this Registration is subject to availability and at the discretion of the Course Organisers, and will be confirmed in writing.

BANK DETAILS FOR TRANSFER OR DEPOSIT:

Bank in UAE: Emirates NBD Bank
Account Name: Leila Edwards and/or Philip Edwards
Account Number: 101 43876792 01
IBAN No: AE10 0260 0010 1438 7679 201
Branch: Umm Suqueim Branch, Dubai, UAE
Swift Code: EBILAEAD

Please notify us when payment has been made, supplying the Bank Reference Number if paid by bank transfer, or, if paid over the counter or via ATB, a scanned copy of the receipt.