

YUAN TRADITIONAL MEDICINE COLLEGE

Training in:

Auricular Acupuncture

Microsystems Acupuncture

Body Acupuncture

**FOOT ACUPUNCTURE COURSE**

**APPLICATION FORM**

FULL NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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PHONE: Home: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HEALTH STATUS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AGE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**WORK INFORMATION**

ORGANISATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

JOB TITLE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

WORK PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

WORK EXPERIENCE:

A PERSONAL REFEREE – who has known you for more than two years and is not related to you – preferably your employer.

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ RELATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TEL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DO YOU HAVE ANY LEGAL RECORDS (i.e. previous/spent convictions)? \_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DECLARATION:**

I declare that all the information given in this application form is true.

SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**COURSE REQUESTED: Dates you would like to attend**

**Foot Acupuncture \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2 DAY COURSE £225**

**Deposit required £50 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Payment details**

We accept cash in person, card by phone or in person, BACS payments (**when making direct payments into the bank please contact us to confirm the date and amount so we can keep a record**) and by cheque which should be made payable to **Yuan TMC.**

**Bank Details:**

NatWest Brixton Branch

Account name: Yuan TMC

Account number: 61881589

Sort Code: 60 03 36

BIC: NWBKGB2L

IBAN: GB36NWBK 6003 3661 8815 89

Yuan Centre, Atlasta Hall
Colwood Gardens
Colliers Wood, SW19 2DT
Tel: +44 (0) 20 8542 9470

Email: yuantmc@btconnect.com

**Website:** [**www.yuantmc.co.uk**](http://www.yuantmc.co.uk/)

**General Information**

**Who does the training?**John Tindall - a world’s leading expert in Traditional Natural Medicine and a pioneer in auricular acupuncture into the UK and Europe. Many of the microsystems courses that are now run in other schools were originally designed and developed by John.

**What time does the course start?**The course starts with registration on Friday at 9am, and kicks off at 9:30am on Saturday and Sunday. The course will finish each day between 4:30-5pm.

**Confirmation of booking**
All students must complete an application form. A deposit of £50 is required to reserve your place. Deposits are non-refundable and non-transferable.

**Fees and what to bring**

The fee includes a course manual, any additional handouts, acupuncture needles, certificate. Please bring your own pencil/pen, notebook and packed lunch. Food can also be purchased from a range of nearby eateries.

**Cancellations**
Fees are non-refundable within 7 business days prior to the start of the course. Refunds will be paid full minus the £50 deposit.