

APPLICATION TO BECOME AN AGENT FOR THE NATIONAL COLLEGE OF TRADITIONAL MEDICINE

FIRST NAME: _____ SURNAME: _____

ADDRESS: _____

SUBURB: _____ STATE: _____ POSTCODE: _____

PHONE: (B/H) _____ (M) _____

BUSINESS NAME: _____

ABN #: _____ DATE OF REGISTRATION: _____

Please also provide the following with your application:

- **A passport sized photo with this application.**
- **A copy of a current Police Check.**

Which courses are you interested in promoting? Please indicate with a tick ⇒⇒

HUMAN STUDIES

- Diploma in Clinical Hypnotherapy
- Certificate IV in Massage
- Diploma of Remedial Massage
- Diploma Reflexology
- Certificate in Anatomy & Physiology
- Certificate in Western Herbal Medicine
- Advanced Dip Western Herbal Medicine
- Advanced Diploma of Nutritional Medicine
- Advanced Diploma of Naturopathy
- Two World's Unite Business Package

ANIMAL STUDIES

- Cert in Canine Myofunctional Therapy
- Cert in Equine Myofunctional Therapy
- Cert in Herbal Medicine for Companion Pets
- Cert in Herbal Medicine for Horses
- Cert in Pasture Management
- Cert in Equine Nutrition
- Cert in Equine Anatomy & Physiology
- Diploma in Equine Naturopathy
- Diploma in Small Animal Naturopathy

Referees:

Please indicate two business referees we can contact

Contact: _____ Contact: _____

Business: _____ Business: _____

Address: _____ Address: _____

Tel (BH): _____ Tel (BH): _____

Fax: _____ Fax: _____

Email: _____ Email: _____