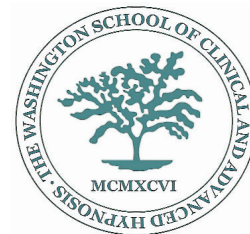


The Washington School of Clinical and Advanced Hypnosis

Your outcome is our achievement



Founder & Principal:

Shaun Brookhouse, GCGI, MA, DCH, CertEd, DHyp, DipProfCouns, HPD, FNGH, FNCH.

Vice Principal:

Fiona Biddle, BSc(Hons), DipCouns, DipCAH, HPD, CPC, BCH, CI, FNCH

Principal Scotland:

John D Lawrence, BSc(Hons), DHP, Dip.CAH, Dip. (Érk) Hyp., BCH, CI, MNCH(Acc)

Training Directors:

Stephanie Kirke, BSc(Hons), MSc, DipHP, HPD, MNCH(Acc), Newbury

David Collingwood-Bell, CertEd, DipCAH, BCH, CI, MNCH(Reg), West Midlands & Wales

Danielle Lyons, BSc(Hons), MSc, PGCE, DipCh.P(MT), CPC, MNCH(Reg), Essex

Stephen Wilson, CertEd, HPD, DHP, MNCH(Lic), Kent

Hilary Norris-Evans, BA(Hons), L-es-L, CertEd, MCAHyp, DABCH, MNCH(Acc), Bristol

Shaun Brookhouse, GCGI, MA, DCH, CertEd, DHyp, DipProfCouns, HPD, FNGH, FNCH, Manchester & London

Julian Davidson, DipCh, HPD, CertHypSup, BCH, CI, MNCH(Reg), Nottingham

Richmael House, 25 Edge Lane, Chorlton-cum-Hardy, Manchester, M21 9JH
Tel: 0845 2578735
email: info@hypno-nlp.org
web: www.hypno-nlp.org

Brookhouse Hypnotherapy Ltd
Trading as The Washington School of Clinical and Advanced Hypnosis

Company Number 5089689 VAT Number: 727173726 Registered Office Rookery Farm House, 12 New Lane, Walton on the Wolds, Leicestershire LE12 8HY



DipCAH/HPD Course Application Form

Name:

Address:

Phone:

Email:

Date of birth:

Qualifications:

I enclose a deposit of £_____ (minimum 20%). I understand this deposit is refundable only if I am not accepted onto the course. Cheques payable to **Stephen Wilson total tuition fee inclusive of VAT and Certification is £1510.00**

I will pay the balance of £_____ on enrolment or I have made payment plan arrangements

I declare that the above information is correct and that, if accepted on to the course, I will pay the full balance as agreed. I understand that acceptance of my application is at the discretion of the Washington School and that no reason need necessarily be given should my application be declined.

Signed

Date

**Please return to
WSCAH (Kent),
15 Carrington Road
Dartford, Kent, DA1 1XN
Tel: 0800 083 5027
E:Mail: admin@kenthypnotherapy.com**