

# Application Form Page 1 of 3

| Student Details |
|-----------------|
| Family Name     |
| First Name      |
| Preferred Name  |
| Date of Birth   |
| First Language  |

| Student Address & Contact Details         |
|---|
| Street Address                            |
|   |
|   |
| Suburb                                    |
| City                                      |
| Province                                  |
| Country                                   |
| Zip/Postal Code                           |
| Home Telephone                            |
| Cell/Mobile Phone                         |
| Email                                     |
| Mailing Address (if different from above) |
|   |
|   |

|        | Online Course Options                           |  |
|--------|---|--|
| Healir | ng Diets Online Course - 12 payments of ε150    |  |
| Healir | ng Diets Online Course - 1 payment of £1500     |  |
| Herba  | ll Medicine Online Course - 12 payments of £150 |  |
| Herba  | ll Medicine Online Course - 1 payment of ε1500  |  |

| Online Course Options   |
|---|
| ntegrative Herbal Medicine Online Course<br>12 payments of ε400     |
| ntegrative Herbal Medicine Online Course<br>1 payments of ε4000     |
| ridology Online Course - 12 payments of £150                        |
| ridology Online Course - 1 payment of £1500                         |
| ntegrative Iridology Online Course - 12 payments of £275            |
| ntegrative Iridology Online Course - 1 payments of £2820            |
| Quantum Botanicals Online Course - 12 payments of ε150              |
| Quantum Botanicals Online Course - 1 payment of £1500               |
| ntegrative Quantum Botanicals Online Course<br>12 payments of ε400  |
| ntegrative Quantum Botanicals Online Course<br>1 payments of ε4000  |
| Naturopathy Online Course - 12 payments of £500                     |
| Naturopathy Online Course - 1 payments of £5000                     |
| Natural Physician Online Course - 12 payments of ε620               |
| Natural Physician Online Course - 1 payments of £6200               |
| Immersion Trainings   |
| Healing Diets Immersion - Registration Fee: £1000                   |
| Healing Diets Immersion - Payment in Full: £1800                    |
| Essential Oils & Healing Touch Immersion<br>Registration Fee: £850  |
| Essential Oils & Healing Touch Immersion<br>Payment in Full: \$1350 |
| Herbal Medicine Immersion - Registration Fee: £850                  |
| Herbal Medicine Immersion - Payment in Full: \$£1350                |
| Naturopathy & Iridology Immersion - Registration Fee: £850          |
| Naturopathy & Iridology Immersion - Payment in Full: £1350          |
| Quantum Botanicals Immersion - Registration Fee: of £850            |
|   |



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#### Data Consent

When a student enrols in a course, the School of Natural Medicine creates a student file where the application files, student assignments, email correspondence and self healing records are kept. This is a digital file, and may also be in a paper format. EU regulations require that the school receive permission to keep personal data, so the following data consent agreement is a part of the application process for enrolling in the school. Please read the details below as they form part of your enrolment contract.

By applying to study with School of Natural Medicine, you are agreeing to School of Natural Medicine and Bonny Casel Melendy holding your correspondence emails, assignments and self healing consultation and treatment records details in a digital or paper format. Personal information about you will be kept confidential at all times and will only shared when necessary to support your studies. If the information is used for any other purposes, with the exception of when the law requires, you will be told and asked to give your consent. You may request a copy of your data or ask it to be sent to another person at any time.

#### **Terms & Conditions**

When a payment is made for a course, training or for self healing, then this is an agreement on the part of the applicant to the full terms and conditions as detailed on this page of our website and acknowledgement that these terms and conditions are binding contract. By submitting your application and making a payment, you are accepting that course fees are non-refundable as once course materials are received, studies have commenced and course materials cannot be unreceived. All self healing fees are non-refundable once the consultation begins. Immersion Training registration fees and payments in full are non-refundable and non-transferable, as detailed in the terms and conditions.

## Notice of Copyright

All online course materials, e-books and handouts are copyrighted and are for the sole use of enrolled students. By enrolling in an online course you agree not to use any materials provided for any purpose beyond personal study and/or self healing. You also agree not to publish the materials, in whole or in part, by any method, including but not limited to email, web or blog posting, digital or print without the written permission of the copyright holder, Casel Melendy. Full terms and conditions can be viewed on our website.

## Student Signal Group & Newsletter

I would like to join the private School of Natural Medicine Student Group on Signal

I would like to receive the school newsletter

## Payment in Full Options

Payment in full can be made via our the individual course links on the enrolment page of our website. Payments can also be made by bank transfer or we can send you a PayPal invoice. If you would like banking details or a PayPal invoice, you can request this by contacting the school directly through the <u>contact page</u> on our website.

## Time Payment Options

Time payments are made through partial.ly and you will find the payment links for time payment options on the enrolment page of our website. By choosing the time payment option you agree to make 12 equal payments for 12 consecutive months for the course of your choice.

# Check One of the Following Options

Payment via school website (required for time payments)

Please send me a PayPal invoice (+3% admin fee)

Please provide banking details for bank transfer/wire

# **Include with Application**

- Completed application form. The form is editable so you can type into it, or you can print, complete, scan or photograph, and then email back to the school at info@schoolofnaturalmedicine.com
- 2. Scan or photo of photo ID
- 3. A personal photo
- 4. Please share a few words on what has inspired you to study natural medicine.

I, the applicant, agree to the School of Natural Medicine terms and conditions in full, and confirm that information on this application form is true, and that I am of legal age and have full authority to apply for the online course and/or immersion training, as indicated on this application form. If paying in time-payments, I agree to make eleven consecutive monthly payments, after my initial payment, which will be on the same day of the month as my first payment.

Signature of Applicant (Digital)

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Date:



# **Data Consent Form**

When a student enrols in a course, the School of Natural Medicine creates a student file where the application files, student assignments and correspondence records are kept. This is a digital file, and may also be in a paper format. Regulations require that the school receive permission to keep a personal data, so the following data consent form is a part of the application process for enrolling in the school. Please fill out and sign digitally or by hand and email back to the school with your application form.

## **Student and Self Healing Personal Records Consent Form**

| I      | agree to School of Natural Medicine and Bonny Casel   |
|--------|---|
| Melen  | dy holding my application, correspondence emails, assignments and self healing consultation     |
| and/o  | r treatment record details in a digital or paper format.  |
| ,      |   |
| Lunde  | erstand that:   |
|        |   |
| •      | all personal information about me will be kept confidential at all times.                       |
|        | it will only be about a dear a consequent of summent was attached as and solf beating           |
| • .    | it will only be shared when necessary to support my studies and self healing.                   |
|        | if the information is used for any other purposes, with the exception of when the law requires, |
|        |   |
|        | I will be told and asked to give my consent.  |
|        | I may voice any concerns about my data at any time.   |
| • .    | i may voice any concerns about my data at any time.   |
| •      | I can ask for my data to be sent to another school, therapist or person at any time.            |
|        |   |
| 1      | Signed:   |
|        | Date:   |
|        |   |
| Pleas  | e list all email addresses that will be used in correspondence with School of                   |
|        | ral Medicine and/or Bonny Casel Melendy:  |
| 114444 | tur nacureme unu, or zomiy cuser nacionaly.   |
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