

Spiritualism New Zealand

Registered Spiritual Healer Application Form

Full 1	Name (Mr/Mrs/Ms/Miss)		
Stree	t Address		
Town	n/City Postal Code Region		
Posta	ıl Address (if different)		
	Date of Birth		
Emai	l Mobile No Mobile No		
Atta	ched to this completed Application form is:		
	A copy of my log of Healing sessions from the past 2 years;		
	Copy of my training log from the past 2 years and the Training Certificate received at my final Spiritual Healing Training Workshop;		
	Four written testimonials from members of the public who have received spiritual healing from me;		
	A short essay, not less than 500 words, on 'What is Spiritual Healing?', its associated Guidelines and Ethics, Absent Healing and Attunement;.		
	Completed nomination section (next page) from my trainer or the member organisation that performs Spiritual Healing to which I belong;		
	Application fee of \$30 OR		
	Date payment made through <u>internet banking</u> to 03-0531-0042824-002		
As a	Registered Spiritual Healer with Spiritualism New Zealand, I agree to:		
	Abide by the Registered Spiritual Healers Code of Ethics;		
	Undergo a Police Vetting check every five years;		
	Continue my development by attending a healing course for Registered Spiritual Healers each year with a Spiritualism New Zealand trainer.		
Sign	ed Date		



Spiritualism New Zealand

Nomination for a Registered Spiritual Healer

Member Organisation / Trainer Details:

Organisation Name, if applicable			
Contact Person		Position	
Email Address		Phone No	
Applicant Provisional Healer:			
Full Name (Mr/Mrs/Ms/Miss)			
Street Address			
Town/City	Postal Code	Region	
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Details of Spiritual Healing training received by applicant:			
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Details of relevant experience:			
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Signed		Date	