

INSTITUTE OF NATURAL HEALING

Enrollment Form

Print this page, fill in your details, and send it with your fee to our address at the bottom of this page.

Yes, I want to put my skills to use.

Please enroll me as a student of The Institute of Natural healing : *Diploma in Herbal Medicine*.

I understand that you'll dispatch my course within five days, by courier and/or airmail.

FIRST NAME:	
LAST NAME:	
ADDRESS:	
ADDRESS:	
POST CODE	
COUNTRY:	
TELEPHONE:	
EMAIL:	
NOTE: <i>We don't give information about our students to anyone.</i>	
<input type="checkbox"/> Payment Plan I enclose a cheque for Rs./ £ _____ including the courier charge made payable to Home Study India.	
<i>For Official Use Only</i>	
Name of Tutor _____	

Applicant's Signature

Home Study India
174/8 NSC Bose Road, Kolkata 700040, India .

Tel: 91 98361 99361
Email: mail@homestudy.in