



**APPLICATION FORM FOR TWO WEEK LIVING WISDOM SCHOOLS**

**Please Note: all information (besides name, address and contact) is optional (return either by e:mail or post to 32 Outlook Parade, Bray Park, QLD 4500)**

DATE: \_\_\_\_\_ AGE (optional) \_\_\_\_\_

HOW DID YOU COME TO KNOW ABOUT THE LIVING WISDOM SCHOOLS?  
\_\_\_\_\_

NAME AND SURNAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_ E:MAIL \_\_\_\_\_

PHONE: \_\_\_\_\_ MOBILE \_\_\_\_\_

MAIN REASON FOR WANTING TO ATTEND THIS SCHOOL IS.....  
\_\_\_\_\_  
\_\_\_\_\_

CURRENT OCCUPATION \_\_\_\_\_

PREVIOUS TRAINING \_\_\_\_\_

I AM PAYING MY \$100.00 DEPOSIT BY CHQ - ELECTRONIC PAYMENT  
(Please make all cheques out to Living Wisdom Counselling and Seminars)

**Please Note:** You are not secured a place in the school until your deposit has been received.

**Electronic Payments in Australia to:**

Credit Union Australia  
BSB: 814 282  
Account No: 30713615  
A/c Name: Living Wisdom

