

**SAMYE FOUNDATION WALES
MINDFULNESS AND WELL-BEING CENTRE
THERAPIST REGISTRATION FORM
2A-4A Cardiff Road, Caerphilly CF83 1JN**

CERTIFICATE OF INSURANCE

**Practitioners are required to have their own professional insurance.
Please give details of this below.**

Name: Address: Town: Post Code: Tel No: Fax No: Email: Membership Reg. No: Exp. Date: / /	OFFICE USE ONLY Verified: Yes No Verified: Yes No Verified: Yes No Cert. No: Renewal Date: Checked By:
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OTHER QUALIFICATION(S)

Qualification	Date	Cert.No.	Copy

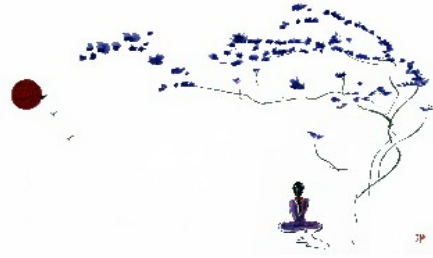
Do you have any previous criminal convictions? YES NO (if yes, please give details on a separate sheet).

ONLY REGISTERED & APPROVED THERAPIES MAY BE PRACTISED IN SAMYE FOUNDATION WALES

DECLARATION

1. *I agree to practice in Samye Foundation Wales Offices/Training Rooms at 2a-4a Cardiff Road, Caerphilly CF83 1JN only the registered and approved healing methods set out by my professional body and confirm the above information is correct and complete.*
2. *I agree to giving Samye Foundation Wales **one month's notice** when I wish to terminate the hire of the premises.*
3. *I agree to comply with and **provide a copy** of all Codes of Conduct issued by my Professional Body while practising, instructing or lecturing in the building at Samye Foundation Wales, Caerphilly.*
4. *I agree to Samye Foundation Wales conducting a Criminal Records Bureau check*

SAMYE FOUNDATION WALES
tel: 02920 860054 email: lorraine@sfwales.org web: www.sfwales.org



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Signature: *Date:*.....

Name in Block Letters

Recommended by:.....

Confirmed by & dated:
(Samye Foundation Wales)

Name (in block letters):.....

Authorised by: *Date:*

REFERENCE:

Please provide the name, address and telephone number of a referee. This person must be someone that knows you in a professional capacity.

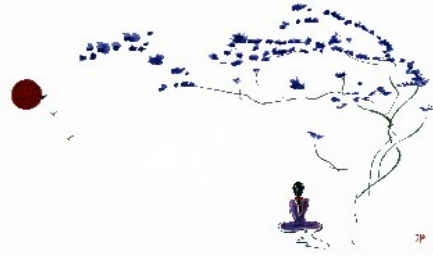
Title:	Address:
Forename:	Postal Code:
Surname:	Tel No.:
Occupation:	Web:.....

SAMYE FOUNDATION WALES

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Samye Foundation Wales which is a registered charity and a company limited by guarantee.
Reg. Co. No. 590 (England and Wales). Reg Office: 2a-4a Cardiff Road, Caerphilly, CF83 1JN
Reg. Charity No: 1122144



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Works Experience

*Please fill in this form clearly, preferably BLOCK CAPITALS and black ink.
Information will be treated as confidential and used for Accreditation purposes only.
Please complete **one form for every therapy** to be practised.*