



Counselling for Oncology
(Cancer) Interpersonal

Authorised & Licensed
Facillitator World Wide for

Full Name:
Address:
.....
.....

Age: Date Of Birth:/...../.....

City:
Mobile:
E-mail:
Course:

City:.....
Mobile:

Work shop time:

2:30pm to 5:30pm

9:00am to 6:00pm

(2 Day Workshop)

Your intent to do this workshop:

Want peace in your life problems

Empower yourself to handle

Any Other reason