

APPLICATION FOR ENROLLMENT IN HERBALWYSE PROGRAM Please email to <u>raphaology@yahoo.com</u> or send by mail to Yonnette Fleming c/o Urban Bush Educator Project 619 Willoughby Avenue Brooklyn NY 11206

Full Name:

Street Address:

What do your friends call you/Sacred name:

City: State: Zip:

Birth Date:

Phone(s):

Current Occupation:

Email:

Special health conditions, allergies, phoebias etc:

Please attach extra pages if you need more space

Thank you for your interest in learning about herbal medicine. This program is limited to 13 participants so it is best to apply early. To help us better understand your interests, experience, and goals, please fill out this application and send it to the address shown above.

Upon receipt of your application, you may be contacted to arrange for an initial phone interview and send you an email or letter confirming class dates and curriculum. Upon notification of acceptance, there is a \$100 non-refundable deposit that is due within 5 days of your acceptance. This deposit count towards your tuition.

Full payment is due 1 week before the course. If you are having difficulty paying for the HerbalWyse course, we are able to accept payment in two installments for this course only. The first half is due one week prior to course and second half is due midway of the course

Please feel free to contact Yonnette Fleming at (718) 638-3566 if you have any questions.

Congratulations on choosing health!

Herbal wysewoman

