Application for Participating in the Natural Self-Healing Course

Please be **honest and concise** so we are able to access the best courses for you to join. Note that applications will only be processed if **every single field** is filled out.

**Send to: fiveimmortals@qq.com**

|  |  |  |  |
| --- | --- | --- | --- |
| **Nationality** |  | **Gender** |  |
| **Name** |  | **Age** |  |
| **Profession** |  |
| **Student’s****telephone number & email address** |  |
| **Course Dates** |  |
| **Health History/****Physical Condition/****surgeries/****Current situation/****Western examination results/ present signs and symptoms (diet, sleep, stool, urination, any abnormalities, etc..)** |  |
| **Western pharmaceuticals****drugs and Chinese herbal medicines intake in past and present** |  |
| **Self introduction** | **.** |
| **Insert Passport Picture** |  |
| **Person to contact with in case of an emergency** |  |
| **Any special religious requirements (example: Shabbat or Rammadan)** |  |
| **I have read and I agree to follow all the temple’s rules and regulations** |  |