

QUANTUM-TOUCH PRACTITIONER APPLICATION

Please complete this application and send with your completed requirements to the address below

Name: _____ Date: _____

Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Country: _____

Phone # (include Area Code or Country/Region Code): _____

Email for QT Business: _____

Business Name(s):

1) _____

2) _____

3) _____

Website Domain Name(s):

1) _____

2) _____

3) _____

1) Write the DATE, INSTRUCTOR/FACILITATOR NAME, and LOCATION of your TWO Quantum-Touch Workshops that you have completed and attach copies of the certificates.*

a) _____

b) _____

*Note: One of the two workshops MUST be a Live Basic Workshop.

2) Read *Quantum-Touch: The Power to Heal* by Richard Gordon. Please initial here _____.

3) Complete a minimum of 60 hours of documented Quantum-Touch sessions.**

The form is located at <http://www.quantumtouch.com/images/uploads/PractitionerHours.pdf>

** Note: Up to 20 hours of the 60 hours may be used on self, animals, plants and distant healing. These 20 hours are to be individually documented per session hour or per session time. Please DO NOT document these hours in a grouped sum.

Attach completed "Documentation for Certified Practitioner Status" form.

4) Provide at least five creative insights about Quantum-Touch.

Attach your creative insights.

5) Print TWO copies of the "Quantum-Touch Code of Ethics." Keep one for your records. Read, initial, sign, and return one (all 3 pages) to the QT Home Office.

The document is located at <http://www.quantumtouch.com/images/uploads/CodeofEthics.pdf>

Attach the signed "Code of Ethics."

6) Create a Personal "Bio" (with optional picture) for the Website and Office Referrals.

Please limit your bio to 250 words. You do not need to send your bio to us. When you are certified we will post your contact information and you will have the ability to post your own bio on the website. Pictures will have to be posted and edited from the main office. If you would like to include a picture with your bio you can either email it to practitioner@quantumtouch.com or mail in a hard copy.

7) Pay the One-Time Practitioner Registration Fee of \$200 USD.

U.S. Practitioners may provide a check, money order, or credit card information. International Practitioners may provide credit card information, or send a money order or international cheque in USD. QT accepts Visa and MasterCard. Please make checks and money orders payable to Quantum-Touch.

Credit card #: _____ Exp: _____

Attach check, money order, or international cheque, if applicable.

8) How would you like your name to appear on your certificate?

9) I have read and agree to comply with the Quantum-Touch ® Trademark and Name Usage Policy, posted on the website at <http://www.quantumtouch.com/index.php?p=terms>

Please initial here _____.

Attach all paperwork to this application and mail your completed practitioner requirements to:

**Quantum-Touch
Attn: Practitioner Certification
P.O. Box 512
San Luis Obispo, CA 93406
USA**

Or email this application and completed practitioner requirements to:

practitioner@quantumtouch.com

Upon certification by the Practitioner Program Director:

- 1) You may advertise yourself as a Certified Quantum-Touch Practitioner.
- 2) You will receive a certificate that states you are a certified Quantum-Touch Practitioner.
- 3) You will be highlighted as a certified Practitioner on the Quantum-Touch website, where your contact information is provided for referrals.
- 4) You may purchase *Quantum-Touch: The Power to Heal*, as well as other QT products, at wholesale prices.

Allow 3-4 weeks for certification.

You will be notified of your status as a Certified QT Practitioner via email.

For questions contact: practitioner@quantumtouch.com