

APPLICATION FORM FOR FIRST ATTUNEMENT TRAINING FOR CHILDREN AND ADULTS



\*Your Name:

\*Your Email:

\*Your Address:

Have you already been attuned to the Pleiadian frequencies? If so, who was your practitioner and the date it was conducted?

Please write your name as you would wish it to appear on your diploma:

Are you a practitioner and if so, what healing modalities do you practice?

How long have you been practicing?

What is the nature of your interest in studying Star Healing Intergalactic Energy™? (e.g. reasons, expectations etc.):

Do you have formal qualifications as a professional? If YES, please give details:

Do you meet one prerequisite for this course by having purchased and read my book [2012 and beyond: The Truth from Archangel Michael](#) or will after acceptance to this course?

It is also recommended that a student read the other ascension piece to Star Healing Intergalactic Energy™ which is Ascended Spaces™ from Archangel Michael for elevating home space. Are you agreeing to this? **The guide book will be sent as a PDF upon acceptance as a free enrollment bonus.** English and Spanish versions are available.

Are you a member of any professional healing associations – if so which ones?

Do you hold professional insurance as an energy healer?

Are you willing to read, sign and return the [code of ethics and course terms](#) including the first year recertification process?

Do you have any questions not addressed on this application?

Kindly send this application form to [kelly@kelly-hampton.com](mailto:kelly@kelly-hampton.com). Thank you.