

INTEGRATIVE SOMATIC THERAPY
FOR YOUR MIND, BODY AND SPIRIT.

EXTERNSHIP APPLICATION

BEGINS MAY 20, 2024

TRAUMA GATES™ EXTERNSHIP TRAINING APPLICATION

| NAME: | |
|---|----------|
| ADDRESS: | |
| PHONE: | |
| EMAIL: | |
| PREFERRED METHOD OF CONTACT (CIRCLE): TEXT PHONE | EMAIL |
| PROFESSIONAL TITLE: | |
| LICENSE AND/OR CERTIFICATION #: | |
| LIABILITY INSURANCE NAME: | |
| POLICY # | |
| PAYMENT: VISA / MASTERCARD | |
| NAME ON CARD: | |
| CARD # | |
| EXPIRATION DATE:/ CVV CODE: BILLING ZIP CODE: | |
| YOUR NAME AS YOU WOULD LIKE IT TO APPEAR ON YOUR CERT | TIFICATE |
| | |
| | |

EMAIL COMPLETED APPLICATION TO info@traumagates.com.

UPON RECEIPT OF THE APPLICATION AND PAYMENT, THE EBOOK WILL BE SENT.