



## Application Form for BRS Apprenticeship

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Email: \_\_\_\_\_

Tel./Mobile \_\_\_\_\_

Name of sponsoring BRS Practitioner: \_\_\_\_\_

Signature of sponsoring BRS Practitioner: \_\_\_\_\_

Name of your Rebirther (if different from above): \_\_\_\_\_

Signature of your Rebirther: \_\_\_\_\_

Details of trainings taken\*:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*Use overleaf for any information you wish to add. There is an opportunity for you to talk through your application and swap rebirths with another BRS Rebirther of your choice.

I hereby apply for Apprenticeship status with the British Rebirth Society.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

At which meeting do you intend to apply for membership?  
\_\_\_\_\_

1. This form should be received by the Membership Secretary at least 7 weeks before the meeting at which you intend to apply.
2. Please enclose with this form your application fee of £5 (non-refundable).
3. Details of the meeting venue to follow. Please enquire if necessary.
4. The BRS publishes a full list of practitioner members, which is available for public enquiries about services offered by Rebirthers. The list is also available internally and to other professionals and organisations which publicise breathwork. For example, it is included on the BRS website and BREATHE Magazine website.

Put a cross in this box if you DO NOT wish your name and address to be included in this list.

