

Association of Universal Healers & Spiritualists
Registered Charity No. 1014604
**99, Wealcroft,
Leam Lane, Gateshead
NE10 8LN**



Application for Speaker and Demonstrator Diploma

Full Name:

Address:

.....

.....

Home Telephone Number: **Mobile Number:**

Please respond to the following:

- | | | |
|----|---|--------|
| 1. | I have been AUHS member for a minimum of 2 years | YES/NO |
| 2. | I have passed the AUHS basic course | YES/NO |
| 3. | I have been a full working medium for a minimum of 2 years | YES/NO |
| 4. | I enclose details of my bookings over the past 2 years | YES/NO |
| 5. | I enclose details of my bookings for the next full year (Please attach details) | |
| 6. | I enclose eight church references who will be contacted to validate my mediumship (Please attach) | |

Only when your mediumship ability has been confirmed to be of a sufficiently high standard, will you then be allowed to enrol for the course and be asked to pay the fee of £40.00.

Please return this form to:

*Rev. Glenys Clarke,
Training Officer A.U.H.S.
7 Part St. Southport
Merseyside
PR8 1HX*