

Center for Integrated Energy Healing

Reiki Training Application Form

Name _____ Date of Birth _____

Address _____

Phone Numbers _____ (home) _____ (cell)

Email _____

How did you find out about the Center for Integrated Energy Healing and this Reiki Training program? _____

Instructions for completing the application:

Please complete the top portion of this application as well as the section for the level of training for which you are applying. Then send your \$25 nonrefundable application fee to the Center for Integrated Energy Healing, 111 Ferris Avenue, Syracuse, NY, 13224. (The \$25 application fee will be applied to the full cost of the class you are applying for). All classes are taught by Mary Riposo, Independent Reiki Master Teacher (certified Usui, Karuna, and Shamballa). If you have any questions, please call Mary at (315) 449-0040 or email Mary@IntegratedEnergyHealing.com. For more information, please go to the website www.IntegratedEnergyHealing.com. Please submit your application as soon as possible to ensure a space in the class! Mary will contact you within one week after receiving the application.

Please complete this section if you are applying for Level I Reiki Training:

Class date of the Level I Reiki training you are applying for: _____

Have you had a minimum of one hour-long Reiki session with a Reiki Master? Yes/No

This is a prerequisite for taking the Level I Reiki training. Please provide the following information before submitting your application:

Date of hour-long Reiki session: _____

Name of Reiki Master: _____

Please complete this section if you are applying for Level II Reiki:

Class date of the Level II Reiki training you are applying for: _____

Have you successfully completed Level I Reiki training at least 21 days prior to the date of the class you are applying to take? Yes/No

This is a prerequisite for taking the Level II Reiki training. Please provide the following information before submitting your application:

Date of Level I Reiki training: _____

Name of Reiki Master Teacher: _____

Please submit a photocopy of your valid Level I Reiki certificate with your application **unless** you have taken your training with the Center for Integrated Energy Healing.

Please complete this section if you are applying for Reiki Master Practitioner

Training: (note: complete this **and** the following section if you are applying to take both the Reiki Master Practitioner and Reiki Master Teacher Training weekend program)

Class date of the Reiki Master Practitioner training you are applying for: _____

Have you successfully completed Level II Reiki training at least 6 months prior to the date of the class you are applying to take? Yes/No

This is a prerequisite for taking the Reiki Master Practitioner training. Please provide the following information before submitting your application:

Date of Level II Reiki training: _____

Name of Reiki Master Teacher: _____

Please submit a photocopy of your valid Level II Reiki certificate with your application **unless** you have taken your training with the Center for Integrated Energy Healing.

Have you completed a minimum of 25 hour-long Reiki sessions on a variety of individuals since your Level II Reiki training? Yes/No

This is also a prerequisite for taking the Reiki Master Practitioner training. Please complete the attached Reiki Sessions Documentation Form and submit it with your application. Reiki sessions given must be an hour-long and must have been given to a variety of individuals. Please do not document more than five sessions on any one individual.

Please complete this section if you are applying for Reiki Master Teacher Training:

Class date of the Reiki Master Teacher training you are applying for: _____

Have you successfully completed Level II Reiki training at least 6 months prior to the date of the class you are applying to take? Yes/No

Have you successfully completed the Reiki Master Practitioner Training or will you be taking it along with this class in a weekend training program? Yes/No

This is a prerequisite for taking the Reiki Master Teacher training. Please provide the following information before submitting your application:

Date of Reiki Master Practitioner Training: _____

Name of Reiki Master Teacher: _____

Please submit a photocopy of your valid Reiki Master Practitioner certificate with your application **unless** you have taken your training with the Center for Integrated Energy Healing, or **unless** you are taking that class in the weekend Reiki Master Training program.

Reiki Sessions Documentation Form

Session #	Date	Name
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