

Lightning Process Application Form

Please read and complete this application form to learn the **Lightning Process with Kate Gare.**

Name:	
Name you wish to be called if different:	
Address:	
Post code:	
Telephone daytime:	evening:
Mobile (if different):	
Email address:	

Am I ready?

Reading this form before you complete it, will help you to decide if the Lightning Process is right for you now. The Lightning Process is a training programme. Our experience is that if people apply the process to their lives they can achieve full health and happiness.

As with any training programme, the trainer can only take responsibility for training and coaching to the best of their ability, then the student must apply the lessons for himself or herself. If the student doesn't apply the training, then they will naturally see very little benefit.

We recommend that you think long and hard before taking this training, does it sound like something that appeals to you, and makes sense to you, something you can commit yourself to? If you feel doubtful, cynical or just want to give it a go to see what happens, then now is probably not the right time for you.

What to expect in the training

Much will be asked of you over the three days of the seminar, but if you take on the challenge the rewards are extraordinary.

Your trainer has a very demanding role during the seminars. They have to not only present the material but also manage and assist you as you learn. This will involve giving you honest and supportive feedback, which you may find challenging, but is essential for your success.

You will need to be open to this feedback, willing to examine your beliefs and opinions, and ready to change anything your trainer identifies as obstructing your path to success. The training agreement section of this application form details what you need to commit to in order to achieve the results others have had from the Lightning Process.

About you

Sex: M / F	Date of Birth:
Occupation:	
What you hope to get from doing the course:	
How would describe your problems / issues / illness (include medical name/ diagnosis if relevant):	
When did your issues begin?	
How did they start?	
What effects has this had / how has this limited your life?	
I know someone personally who's used the Lightning process to recover their health: YES / NO	

Your future

When you have discovered a way to get well / resolved your issues, what will you put your energies into? What would you love to do with your life?

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Training Agreement

Our experience suggests you should only take the training if you agree to the following statements.

If you are certain that you agree with the statements please circle 'AGREE'; please be aware that we will not accept you onto the training programme unless all the statements are agreed to.

I understand that the Lightning Process is a training programme and not a therapy or treatment.	AGREE / DISAGREE
I understand that learning the Lightning Process therefore does not guarantee me any results.	AGREE / DISAGREE
I accept full responsibility for the effects of applying or not applying this training programme to my life.	AGREE / DISAGREE
I recognise that the mind and body can powerfully influence each other	AGREE / DISAGREE
I am prepared to look at and challenge my beliefs about my condition / illness, my health and myself.	AGREE / DISAGREE
I am totally prepared to do the sometimes challenging work of starting to think very differently that's required to get myself back on track.	AGREE / DISAGREE
I will deeply and honestly examine my beliefs.	AGREE / DISAGREE
I will be available for coaching at all times.	AGREE / DISAGREE
I will change anything that my trainer identifies as destructive.	AGREE / DISAGREE
I will be open to feedback of the trainer and my fellow trainees.	AGREE / DISAGREE
I recognise that I have blindspots that I don't even know I have.	AGREE / DISAGREE

Beliefs around your health

Overall, what score would you give yourself out of 10 for your belief that you can recover using the Lightning Process? _____

I am determined to be the next success story: yes / no / maybe

Please score each of the following out of 10, where 10 means “I totally agree with this statement.”

Statement	Score 0 - 10
I want to resolve all my issues.	
It is possible for me to resolve all my issues.	
I am capable of learning how to resolve all my issues.	
It is appropriate for me to resolve my issues and I am prepared to do what it takes to make those changes.	
I am willing to change negative lifestyle patterns, thought processes and limiting beliefs.	
I have the responsibility for resolving these issues and the power to do that.	
I deserve to and am valuable enough to resolve my issues.	
In terms of my issues and my ability to follow instructions, I am similar enough to all those others who have used the process to recover that I am bound to make the same kind of changes as them.	

The X factor

Please write down a few sentences on what you feel is needed from YOU during the Lightning Process to get the changes others have achieved.

Please select one answer for each of the following questions:

If you are presented with information do you tend to accept things as they are rather than tending to question them?	Yes No Other
If others can get well using the process then so can I - do you agree?	Yes No Other
My type of illness/issues (that I want to use the process on) are generally easily recoverable from.	True May be true Not true
My specific illness/issues are easy to resolve using the process.	True May be true Not true
My issues are different from other people's ones.	True May be true Not true

Pair the words on the left with just one that has an opposite meaning.

Simple - _____	Smooth Difficult
Short - _____	Complex Soft
Rough - _____	High Tall

Previous and multiple applications

Have you applied to take the training before? YES / NO (if no, go to next section)

If yes, which trainer did you apply to:
and when:

What has changed for you since applying to that trainer?

To process your application we will need to speak to that trainer about your case, please only send in the application form if you agree to this.

Please do not send in multiple applications to different practitioners.

Payment details

The fee for the Lightning Process is £590. Payment is by cheque (payable to 'everylife'). If you are unable to pay by cheque please contact Kate directly for alternative ways of making your payment.

Conditions of payment

Please send the cheque with this form. We will not cash it until you have been booked onto a course and we have confirmed the dates with you. Fees cannot be refunded in the event of a cancellation on your part after the cheque has been cashed. This is because we run small group trainings with limited spaces - if you take up a space and cancel, no one else will be able to fill it once the course starts. However, if you cancel and we are able to fill your space your fees will be refunded

We reserve the right to terminate your training if we feel your continued participation would be unhealthy or unhelpful for you or another member of the training group. Your fees will not be refunded in these circumstances.

Ownership

All documents you receive as part of your training constitute an intellectual property and are not to be reproduced, sold or distributed in anyway.

Declaration

If you agree to all of the above conditions in this document please fill in and sign the following declaration:

I, (full name)

- understand and agree that once I pay my fees they cannot be refunded;
- understand the statements I have agreed to;
- agree to adhere to the above conditions.

Signature:

Date:

This must be completed if you are under 18 years old

If you are under 18 years old please ask your parent or guardian to read through the form and if they also agree to the terms and conditions, for them to sign the form too:

Name:
Signature:
Relationship to applicant:
Date:

Thanks for helping us speed up your application by filling this out. It may take time, but the information helps us ensure you get the most out of the Lightning Process.

Please send this form with your cheque for £590 to:
Kate Gare, everylife, Flat 5, 49 Palace Square, London, SE19 2LT.

It is recommended that you send Kate a quick email at kate@everylife.co.uk to let her know you have posted the form. This is to safeguard against post going missing.

Learning facilitator

It is possible to bring **someone to help you in your learning**. If you feel that having someone with you will be of great benefit you can discuss this with Kate when she calls you to discuss your application form.

Certificate of attendance

From August 2008 on completion of the course you will receive an attendance certificate from your trainer. We foresee that, over time, taking a Phil Parker Lightning Process™ training course will be considered a valuable component of an individual's life and work skills. The certificate will act as a reference that you attended the course for personal development, which can then be presented to future employers as evidence of your Phil Parker Lightning Process™ training attendance.

Data protection policy

The Register of Lightning Process™ Practitioners is registered with The Information Commissioners Office and all information is held in accordance with the Data Protection Act 1988.

You can decide to have your attendance certificate logged, together with your name, certificate number and e-mail address with Lightning Process head office. This will:

- Ensure that it can be replaced in case of loss
- Help us with our research and statistics
- Help us to check that you have received the high standard of care we expect from members of our register.

If you would **like this option please tick this box**

In addition to the logging of your details for the purposes outlined above, we would also like to occasionally inform you of relevant developments in the Lightning Process™ and its associated programmes. This is an optional service. Your details will never be passed on to anyone else for any reason.

Please **tick this box if you wish to receive occasional and relevant correspondence** from us about this