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## REGISTRATION FORM NATURAL NUTRITION PROGRAM Calgary Branch

LEGAL NAME: \_\_\_\_\_ (First) \_\_\_\_\_ (Last)

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ PROVINCE: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

PREFERRED PHONE: Home / Work / Cell \_\_\_\_\_ VERIFIED BY PICTURE ID: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ MM/DD/YYYY EMAIL: \_\_\_\_\_

### SELECT PREFERRED SESSION:

\_\_\_\_\_ ONE YEAR PROGRAM – Monday & Thursday DAY (10 am to 1:30 pm)  
AUGUST 26, 2019 – JUNE 26, 2020

\_\_\_\_\_ ONE YEAR PROGRAM – Monday & Thursday EVENING (6 pm to 9:30 pm)  
AUGUST 26, 2019 – JUNE 26, 2020

**\*Please note the Registration Fee of \$500.00 (no GST) is due at the time of interview.**

### PLEASE READ THE FOLLOWING PRIOR TO SIGNING THIS FORM:

**REQUIREMENTS:** I understand that, in addition to the classroom studies in which I must maintain an average of 80%, a minimum of 50 Practical hours (**Practical sessions are Wednesdays from either 10am-1pm or 6-9pm at the school location**) and 10 case studies must be completed before the final examination date (mid-July) to meet the CSNN requirements to graduate.

**ADMISSION:** (1) A student must be 18 years of age or older; (2) Hold a minimum provincial high school diploma or General Equivalency Diploma (G.E.D.) with 50% or better in grade 12 English, verified by official transcript (**must accompany the registration forms**); (3) A successful completion of interview by school.

**RELEASE:** "I hereby release The Canadian School of Natural Nutrition Inc. and all branches and affiliations from all claims of damages arising from any accident or injury which is caused by or arises from participation of the applicant named herein, during any program or any facility or any location where a program is held."

**CONFIDENTIALITY AND DISCLOSURE:** Absolutely no part of the contents in the copyrighted publications, course material or teachers notes, may be photocopied or adapted for teaching purposes or shared with anyone not taking the CSNN program. BREACH OF THESE RESTRICTIONS WILL RESULT IN LEGAL ACTION.

I certify that I have read and understood the items outlined on the registration form. Also, I understand that I am expected to follow the CODE OF ETHICS and ALL SCHOOL POLICIES OUTLINED IN THE STUDENT HANDBOOK.

\_\_\_\_\_  
STUDENT'S SIGNATURE

\_\_\_\_\_  
REGISTRAR'S APPROVAL SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DATE