New Foundations in Herbal Medicine
Course Application

Name: _____

Address: _____

City: _____ State: _____ Zip _____

Phone: _____

E-Mail: _____

1. Why do you want to take this course? How do you plan to use the information?

2. How did you hear about the New Foundations in Herbal Medicine course?

3. What, if any, is your experience with herbal medicine? Please include self-study, class experience, favorite books, etc.

4. Describe any formal training in Complementary/Alternative Medicine you have had (e.g. nutrition, massage therapy, reiki, therapeutic touch, acupuncture, naturopathy homeopathy, etc...)?

5. Do you have any formal conventional medical training? (MD, RN, NP, PA, DDS).

6. This program requires an 18-month time commitment and a financial commitment of $3,500.00 plus optional costs incurred for attending a three-day intensive at Medicine Lodge Ranch in Pecos, NM. Are there any situations (school, career, family, health, etc.) that would prevent you from keeping these commitments?

7. This is an On-line internet based curriculum accompanied by a private Facebook group page for dialogues and Q&A. Do you feel you can meet these requirements?

Additional Comments:

Please scan and email this application to jcarnazzo@drlowdog.com or mail to:
Integrative Medicine Concepts, LLC
Attn: James Carnazzo
P.O. Box 709
Pecos, NM 87552

Integrative Medicine Concepts, LLC, which sponsors the New Foundations in Herbal Medicine course, does not deny enrollment, or make any distinction of, students regardless of race, color, creed, religion, nationality, sexual orientation or gender. You must be 18 years of age or older to attend classes.