



IICT members must complete the Professional Liability Insurance Application for Individual Allied Health Care Professionals. Instructions to complete and submit the application are listed below.

1. Fill out both forms. Applicants are allowed to print and sign or provide an electronic signature.
2. Email completed applications to **Lockton_Info@LocktonAffinity.com** for review.
3. Forward this welcome email to **Lockton_Info@LocktonAffinity.com** as confirmation of your approved modalities.
4. Once Lockton Affinity emails you a quote, please follow their instructions to pay.



Professional Liability Insurance Application for Individual Allied Healthcare Professionals



Please complete this form and email to Lockton_info@LocktonAffinity.com. A Lockton Affinity representative will then email you your quote and payment details.

THIS IS A CLAIMS MADE AND REPORTED POLICY. SUBJECT TO ITS TERMS, THIS POLICY APPLIES ONLY TO ANY CLAIM FIRST MADE AGAINST THE INSURED AND REPORTED IN WRITING TO THE UNDERWRITERS DURING THE POLICY PERIOD OR EXTENDED REPORTING PERIOD, IF APPLICABLE. DAMAGES AND CLAIMS EXPENSES SHALL BE APPLIED AGAINST THE DEDUCTIBLE. CLAIMS EXPENSES ARE WITHIN AND REDUCE THE LIMIT OF LIABILITY UNDER THIS POLICY. THE UNDERWRITERS SHALL NOT BE LIABLE FOR ANY CLAIMS EXPENSES OR FOR ANY JUDGEMENT OR SETTLEMENT AFTER THE LIMIT OF LIABILITY HAVE BEEN EXHAUSTED. PLEASE READ THIS POLICY CAREFULLY.

Section I: APPLICANT INFORMATION

What is your Allied Healthcare occupation? (Find a complete list of occupations eligible for coverage attached.)

(Not all occupations qualify for coverage. You must hold a valid license or certificate if required by federal, state or local regulations for each occupation requested.)

Are you a member of any professional association related to your occupation? Yes No

If yes, provide Association name: _____ Member number: _____

Applicant Name (First/Last): _____

Business Name (optional): _____

If you are the sole owner of your business and have no employees, your business name will also be listed as a Named Insured on your policy. If you do not own 100% of your business or if you have employees or other associated individuals providing services on your behalf, please complete the Group Coverage application, which can be downloaded at LocktonAffinityHealth.com/IICT.

Street Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Section II: EMPLOYMENT/OCCUPATION INFORMATION

How many years of relevant experience do you have? (Include any time you may have worked under supervision)

- Greater than 1 year, less than two years
- Greater than 2 years, less than three years
- Greater than 3 years

How many hours do you work per week? _____

Select your status: (If you are both employed and self-employed, please select self-employed)

- Employed (you provide services on behalf of an entity you do not own, and receive a W-2 form from your employer)
- Self-Employed Full-time (you provide services as an independent contractor, and pay self-employment taxes using a 1099 form)
- Self-Employed Part-time (less than 25 hours a week)
- Student - Anticipated Graduation Date: ____ / ____ / ____

Have you obtained secondary certification or licensure or had more than four hours of continuing education on risk management, ethics, or legal issues relevant to your profession within the past 12 months? You may be eligible for a discount. Yes No

If yes, list the Name of Organization _____
 Date of Certification or Continuing Education _____ (mm/dd/yyyy)

This policy does not provide coverage for the following exposures. Please review the list carefully.

- Professional services to residents in/on the premises of any long-term care facility, i.e. nursing home or residential care facility
- Youth-focused overnight professional programs such as Outward-Bound, boot camps, etc.
- Professional services to professional athletes whose annual income is \$25,000 or greater
- Jobsite training or consulting that would normally be performed on a construction jobsite or in a manufacturing or factory setting by a safety inspector, safety trainer, or environmental inspector or consultant.

Do you provide ANY of the above services? Yes No

If yes, please contact Lockton Affinity at [Lockton Info@LocktonAffinity.com](mailto:Info@LocktonAffinity.com) or (800) 253-5486 .

Have you used or do you plan to use any life sustaining or critical life monitoring equipment or devices in your practice other than emergency defibrillation devices, i.e. an Automated External Defibrillator (AED)? This includes oxygen and other medical gases used in conjunction with respiratory therapy, dialysis or heart lung machines, SIDS monitors or any other life dependent monitors or equipment or devices that malfunction and could result in death or serious deterioration of a patient's health condition. Yes No

Section III: PROFESSIONAL LIMITS AND COVERAGE

Select the limits you require:

- \$2,000,000 / \$4,000,000
- \$1,000,000 / \$3,000,000
- \$1,000,000 / \$1,000,000
- \$500,000 / \$500,000

Are you listed as the Named Insured on another active Professional Liability policy that provides coverage for the same occupation and offers claims made coverage? Yes No

Would you like to purchase a policy that provides coverage for prior incidents by matching your current policy's Prior Acts/Retroactive date? Yes No

If **"Yes"** to both questions above, please provide a copy of your current Claims Made Declarations Page, an endorsement listing your prior acts retroactive date or complete the following:

Insurance Company Name: _____

Policy Expiration Date: _____ (mm/dd/yyyy)

Policy Prior Acts/Retroactive Date: _____ (mm/dd/yyyy)

If **"No"** to either of the above, the Policy Prior Acts/Retroactive Date will be the policy effective date.

**NOTE: You will need to provide Underwriters with a copy of your expiring policy to verify your current prior acts retroactive date should a claim be presented in the future under this program.*

Section IV: ADDITIONAL INSURED TO BE INSURED

Additional Insureds must have a valid insurable interest or a written requirement to be included on your insurance. Please describe the business relationship or insurable interest of the Additional Insureds using the list below*.

Name of Additional Insured	Is the Additional Insured an Organization or an Individual?	Complete Address of Additional Insured	Business Relationship/Insurable Interest: (enter the applicable number(s) from the list below or explain)

*For Business Relationship, choose from the following: (1) Co-Owner Of Insured Premises (2) Grantor Of Franchise (3) Land Owner Lessor Of Leased Equipment Lessor of Premises (4) Managers of Premises used for providing Professional Services (5) Mortgagee, Assignee, Or Receiver (6) Owner Or Other Interests From Whom Land Has Been Leased (7) I am in a contractual agreement with the requested Additional Insured to name them as such (8) They are my employee or independent contractor (9) Other; please describe.

CERTIFICATE HOLDER

If you are required by contract to provide Proof of Coverage to a third party, provide the required information below. (A Proof of Coverage Certificate will automatically be issued with your policy documents).

Name of Certificate Holder	Is the Certificate Holder an Organization or an Individual?	Complete Address of Certificate Holder

Section V: WARRANTY QUESTIONS

("You" means any individual proposed for this insurance including any current or past employee, independent contractor or additional insured on your behalf.)

Have you experienced any of the following? Yes No

- Within the last 10 years, have you ever had a state license, certification, registration or malpractice insurance revoked, suspended, refused, denied renewal, cancelled, placed on probation, voluntarily surrendered or is such pending?
- Within the last 10 years, has a claim or suit for alleged malpractice been brought against you or are you aware of any incident that might reasonably lead to such a claim or suit?
- Have you ever been convicted (as an adult) of a felony or is any such case pending?
- Within the last 10 years, have you had any complaints or charges brought against you by any licensing board or professional ethics body?

IMPORTANT: If any answer above is "Yes", please attach a detailed explanation including dates, names of parties involved, allegations, your written response to the allegations if applicable and a copy of any formal ruling or notice by any regulator, licensing body, professional ethics board or insurer.

Section VI: SIGNATURE SECTION

THE UNDERSIGNED IS AUTHORIZED BY THE APPLICANT TO SIGN THIS APPLICATION ON THE APPLICANT'S BEHALF AND DECLARES THAT THE STATEMENTS CONTAINED IN THE INFORMATION AND MATERIALS PROVIDED TO THE INSURER IN CONJUNCTION WITH THIS APPLICATION AND THE UNDERWRITING OF THIS INSURANCE ARE TRUE, ACCURATE AND NOT MISLEADING. SIGNING OF THIS APPLICATION DOES NOT BIND THE APPLICANT OR THE INSURER TO COMPLETE THE INSURANCE, BUT IT IS AGREED THAT THE STATEMENTS CONTAINED IN THIS APPLICATION AND ANY OTHER INFORMATION AND MATERIALS SUBMITTED TO THE INSURER IN CONNECTION WITH THE UNDERWRITING OF THIS INSURANCE ARE THE BASIS OF THE CONTRACT SHOULD A POLICY BE ISSUED, AND HAVE BEEN RELIED UPON BY THE INSURER IN ISSUING ANY POLICY.

THIS APPLICATION AND ALL INFORMATION AND MATERIALS SUBMITTED WITH IT SHALL BE RETAINED ON FILE WITH THE INSURER AND SHALL BE DEEMED ATTACHED TO AND BECOME PART OF THE POLICY IF ISSUED. THE INSURER IS AUTHORIZED TO MAKE ANY INVESTIGATION AND INQUIRY AS IT DEEMS NECESSARY REGARDING THE INFORMATION AND MATERIALS PROVIDED TO THE INSURER IN CONNECTION WITH THE UNDERWRITING AND ISSUANCE OF THE POLICY.

THE APPLICANT AGREES THAT IF THE INFORMATION PROVIDED IN THIS APPLICATION OR IN CONNECTION WITH THE UNDERWRITING OF THE POLICY CHANGES BETWEEN THE DATE OF THIS APPLICATION AND THE EFFECTIVE DATE OF THE INSURANCE, THE APPLICANT WILL, IN ORDER FOR THE INFORMATION TO BE ACCURATE ON THE EFFECTIVE DATE OF THE INSURANCE, IMMEDIATELY NOTIFY THE INSURER OF SUCH CHANGES, AND THE INSURER MAY WITHDRAW OR MODIFY ANY OUTSTANDING QUOTATIONS OR AUTHORIZATIONS OR AGREEMENTS TO BIND THE INSURANCE.

I HAVE READ THE FOREGOING APPLICATION FOR INSURANCE AND REPRESENT THAT THE RESPONSES PROVIDED ON BEHALF OF THE APPLICANT ARE TRUE AND CORRECT.

FRAUD WARNING DISCLOSURE

ANY PERSON WHO, WITH INTENT TO DEFRAUD OR KNOWING THAT (S)HE IS FACILITATING A FRAUD AGAINST THE INSURER, SUBMITS AN APPLICATION OR FILES A CLAIM CONTAINING A FALSE OR DECEPTIVE STATEMENT MAY BE GUILTY OF INSURANCE FRAUD.

NOTICE TO ALABAMA, ARKANSAS, LOUISIANA, NEW MEXICO AND RHODE ISLAND APPLICANTS: ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON.

NOTICE TO COLORADO APPLICANTS: IT IS UNLAWFUL TO KNOWINGLY PROVIDE FALSE, INCOMPLETE, OR MISLEADING FACTS OR INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING OR ATTEMPTING TO DEFRAUD THE COMPANY. PENALTIES MAY INCLUDE IMPRISONMENT, FINES, DENIAL OF INSURANCE, AND CIVIL DAMAGES. ANY INSURANCE COMPANY OR AGENT OF AN INSURANCE COMPANY WHO KNOWINGLY PROVIDES FALSE, INCOMPLETE, OR MISLEADING FACTS OR INFORMATION TO A POLICYHOLDER OR CLAIMANT FOR THE PURPOSE OF DEFRAUDING OR ATTEMPTING TO DEFRAUD THE POLICYHOLDER OR CLAIMANT WITH REGARD TO A SETTLEMENT OR AWARD PAYABLE FROM INSURANCE PROCEEDS SHALL BE REPORTED TO THE COLORADO DIVISION OF INSURANCE WITHIN THE DEPARTMENT OF REGULATORY AGENCIES.

NOTICE TO DISTRICT OF COLUMBIA APPLICANTS: WARNING: IT IS A CRIME TO PROVIDE FALSE OR MISLEADING INFORMATION TO AN INSURER FOR THE PURPOSE OF DEFRAUDING THE INSURER OR ANY OTHER PERSON. PENALTIES INCLUDE IMPRISONMENT AND/OR FINES. IN ADDITION, AN INSURER MAY DENY INSURANCE BENEFITS IF FALSE INFORMATION MATERIALLY RELATED TO A CLAIM WAS PROVIDED BY THE APPLICANT.

NOTICE TO FLORIDA APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.

NOTICE TO KANSAS APPLICANTS: ANY PERSON WHO, KNOWINGLY AND WITH INTENT TO DEFRAUD, PRESENTS, CAUSES TO BE PRESENTED OR PREPARES WITH KNOWLEDGE OR BELIEF THAT IT WILL BE PRESENTED TO OR BY AN INSURER, PURPORTED INSURER, BROKER OR AGENT THEREOF, ANY WRITTEN STATEMENT AS PART OF, OR IN SUPPORT OF, AN APPLICATION FOR THE ISSUANCE OF, OR THE RATING OF AN INSURANCE POLICY FOR PERSONAL OR COMMERCIAL INSURANCE, OR A CLAIM FOR PAYMENT OR OTHER BENEFIT PURSUANT TO AN INSURANCE POLICY FOR COMMERCIAL OR PERSONAL INSURANCE WHICH SUCH PERSON KNOWS TO CONTAIN MATERIALLY FALSE INFORMATION CONCERNING ANY FACT MATERIAL THERETO; OR CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT.

NOTICE TO MAINE, TENNESSEE, VIRGINIA AND WASHINGTON APPLICANTS: IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES MAY INCLUDE IMPRISONMENT, FINES OR A DENIAL OF INSURANCE BENEFITS.

NOTICE TO MARYLAND APPLICANTS: ANY PERSON WHO KNOWINGLY OR WILLFULLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY OR WILLFULLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON.

NOTICE TO OKLAHOMA APPLICANTS: WARNING: ANY PERSON WHO KNOWINGLY, AND WITH INTENT TO INJURE, DEFRAUD OR DECEIVE ANY INSURER, MAKES ANY CLAIM FOR THE PROCEEDS OF AN INSURANCE POLICY CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING INFORMATION IS GUILTY OF A FELONY.

NOTICE TO KENTUCKY, NEW JERSEY, NEW YORK, OHIO AND PENNSYLVANIA APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME, AND SUBJECTS SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES. (IN NEW YORK, THE CIVIL PENALTY IS NOT TO EXCEED FIVE THOUSAND DOLLARS (\$5,000) AND THE STATED VALUE OF THE CLAIM FOR EACH SUCH VIOLATION.

Signed*: _____

Date: _____

Print Name: _____

Title: _____

If this **Application** is completed in Florida, please provide the Insurance Agent's name and license number. If this **Application** is completed in Iowa, please provide the Insurance Agent's name and signature only.

Agent's Signature*: _____

Agent's Printed Name: _____

Florida Agent's License Number: _____

Send completed and signed applications to Lockton Affinity at:

Lockton_Info@LocktonAffinity.com or

Lockton Affinity, LLC
PO Box 410679
Kansas City, MO 64141

Questions?

Email: Lockton_Info@LocktonAffinity.com

Phone: (800) 253-5486

This Professional Liability Insurance program has been organized as a purchasing group (National Professional Purchasing Group Association, Inc.), pursuant to legislation enacted by the U.S. Congress as the Federal Liability Risk Retention Act of 1986. You automatically become a member of the purchasing group once your completed application has been approved and your premium has been received.

IICT Members

Select your occupation(s) from the list of approved modalities.

IICT Group 1			
<input type="checkbox"/> AcuPoint Therapy <input type="checkbox"/> Art Psychotherapy <input type="checkbox"/> Art Therapy <input type="checkbox"/> Biocentric Psychoanalysis <input type="checkbox"/> Biomagnetic Healing <input type="checkbox"/> BrainWorking Recursive Therapy <input type="checkbox"/> Business Coaching <input type="checkbox"/> Cognitive Behavioral Therapy (CBT) <input type="checkbox"/> Color Coaching <input type="checkbox"/> Conscious Uncouple Coaching <input type="checkbox"/> Consciousness Coaching <input type="checkbox"/> Counseling <input type="checkbox"/> Counseling - Progressive <input type="checkbox"/> Counseling - Supervision	<input type="checkbox"/> Counseling- Online <input type="checkbox"/> Creatrix Transformology <input type="checkbox"/> Effectiveness Training <input type="checkbox"/> Emotional Anatomy <input type="checkbox"/> Goddess for Life Coach <input type="checkbox"/> Group Counseling <input type="checkbox"/> Health Counselor <input type="checkbox"/> Health Coach - Inttegrative Healing <input type="checkbox"/> Holistic Counseling <input type="checkbox"/> Holistic Health Coach <input type="checkbox"/> How to get a Bigger Bite out of Life <input type="checkbox"/> Human BioAcoustics <input type="checkbox"/> Inner Child Therapy <input type="checkbox"/> Inner Personal Development <input type="checkbox"/> Integrative Coaching <input type="checkbox"/> Integrated and Dynamic Listening Systems	<input type="checkbox"/> Journey to Wellness <input type="checkbox"/> Life Coaching <input type="checkbox"/> Lifestyle, Food & Wellness Coaching <input type="checkbox"/> Living Threads <input type="checkbox"/> Mediation <input type="checkbox"/> Mentor (Counseling) <input type="checkbox"/> NES Assessment & Treatment <input type="checkbox"/> Narrative Therapy <input type="checkbox"/> Neuro Life Coach <input type="checkbox"/> Nonviolent Communication <input type="checkbox"/> Ontological Coaching <input type="checkbox"/> Programs of the Heart <input type="checkbox"/> Progressive Counseling <input type="checkbox"/> Psychoanalysis <input type="checkbox"/> Psychodrama <input type="checkbox"/> Psychotherapy	<input type="checkbox"/> Psychophysics <input type="checkbox"/> Quantum Emotional Healing™ <input type="checkbox"/> Restoration <input type="checkbox"/> Sacred Circles <input type="checkbox"/> Sandplay <input type="checkbox"/> Therapies <input type="checkbox"/> Soul Link <input type="checkbox"/> Speech Pathology <input type="checkbox"/> Spiritual Counseling <input type="checkbox"/> Stress Management <input type="checkbox"/> Telephone Counseling <input type="checkbox"/> Transpersonal Art Therapy <input type="checkbox"/> Transpersonal Counseling <input type="checkbox"/> The Sister Circles Facilitator <input type="checkbox"/> The Joyality Program <input type="checkbox"/> Ho'oponopono <input type="checkbox"/> Menstrual Cycle Coaching <input type="checkbox"/> Self Intelligence Coach <input type="checkbox"/> MindBody Syndrome (TMS) Practitioner <input type="checkbox"/> Women's Holistic Hormone Health <input type="checkbox"/> Peaceful Kids <input type="checkbox"/> Advanced Skincare and Repair Nutrition Specialist <input type="checkbox"/> Results Coaching <input type="checkbox"/> Somatic Experiencing <input type="checkbox"/> Self Directed Healing (SDH) <input type="checkbox"/> Persona Archetype Coach <input type="checkbox"/> Compassionate Inquiry <input type="checkbox"/> Root Cause Method <input type="checkbox"/> The Neurosomatic Release
IICT Group 2			
<input type="checkbox"/> Aerobics Instruction <input type="checkbox"/> Ageless Grace <input type="checkbox"/> Angel Swimming <input type="checkbox"/> Antigravity Yoga <input type="checkbox"/> Artistic Eurythmy <input type="checkbox"/> Bones for Life <input type="checkbox"/> Callanetics Exercise Method <input type="checkbox"/> Chair Yoga <input type="checkbox"/> Chi Moves <input type="checkbox"/> Chi Running® <input type="checkbox"/> Chi Walking® <input type="checkbox"/> ChiBall	<input type="checkbox"/> Exercise Physiology <input type="checkbox"/> Fitness Instruction <input type="checkbox"/> Five Tibetan Rites <input type="checkbox"/> Gitananda Yoga <input type="checkbox"/> Gyrotonic/ Gyrokinesis <input type="checkbox"/> Hasya Yoga (Laughter Yoga) <input type="checkbox"/> Hatha Yoga <input type="checkbox"/> Healing Dance <input type="checkbox"/> Iso-Chi <input type="checkbox"/> Kids Yoga <input type="checkbox"/> Kriya Yoga <input type="checkbox"/> Kundalini Yoga	<input type="checkbox"/> Personal Training <input type="checkbox"/> Pilates <input type="checkbox"/> Pilateyko Pilates <input type="checkbox"/> Pole Pilates <input type="checkbox"/> Poliquin™ BioSignature Modulation <input type="checkbox"/> Posture Dynamics <input type="checkbox"/> Power Yoga <input type="checkbox"/> Prenatal Yoga <input type="checkbox"/> Purna Yoga <input type="checkbox"/> Qoya <input type="checkbox"/> Rainbow Children	<input type="checkbox"/> Stillness in Movement <input type="checkbox"/> Tai Chi <input type="checkbox"/> Tai Chi for Arthritis <input type="checkbox"/> Tai Chi for Diabetes <input type="checkbox"/> Tantra <input type="checkbox"/> The Art of Feminine Presence™ <input type="checkbox"/> Tone N Go Yoga <input type="checkbox"/> Vibrational Exercise Therapy <input type="checkbox"/> Wellbeing Consultancy and Coaching <input type="checkbox"/> Wellness Consultancy and Coaching

<input type="checkbox"/> Corrective Exercises <input type="checkbox"/> Dance Movement Therapy <input type="checkbox"/> Dancing for Birth <input type="checkbox"/> Energy Yoga <input type="checkbox"/> Eutony <input type="checkbox"/> Exercise Advice (as part of overall treatment)	<input type="checkbox"/> Laughter Wellness <input type="checkbox"/> Laughter Yoga <input type="checkbox"/> Let Your Yoga Dance <input type="checkbox"/> Natural Breastcare <input type="checkbox"/> NIA Technique	<input type="checkbox"/> Rosen Method Movement <input type="checkbox"/> SIMPLE Movement Program <input type="checkbox"/> Slings Myofascial Training <input type="checkbox"/> Sports Coaching <input type="checkbox"/> Sports Training - Fitness <input type="checkbox"/> Sports Psychology	<input type="checkbox"/> Whole Woman® <input type="checkbox"/> Wu Tao <input type="checkbox"/> Yoga <input type="checkbox"/> YogaBugs <input type="checkbox"/> Yogalates <input type="checkbox"/> Zumba <input type="checkbox"/> Aetheric Healing
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IICT Group 3

<ul style="list-style-type: none"> <input type="checkbox"/> Access Consciousness (Access Bars) <input type="checkbox"/> Access Bars <input type="checkbox"/> Access EFT <input type="checkbox"/> Accusense 232 Assessment <input type="checkbox"/> Accusonic Plus Ultrasound Machine <input type="checkbox"/> Acu-energetics <input type="checkbox"/> Acutonics <input type="checkbox"/> Advanced Sports & Exercise Nutritional Advisor <input type="checkbox"/> African Drumming <input type="checkbox"/> Aka Lani <input type="checkbox"/> Alexander Technique <input type="checkbox"/> Allergy Kit Allergy Relief Treatments <input type="checkbox"/> Angel Card Reading <input type="checkbox"/> Angelic Healing <input type="checkbox"/> Angel Intuitive <input type="checkbox"/> Angel Therapy Practitioner <input type="checkbox"/> Animal B.E.S.T. (Bio-Energetic Synchronziation Technique) <input type="checkbox"/> Animal Communication 	<ul style="list-style-type: none"> <input type="checkbox"/> Animal Dreaming <input type="checkbox"/> Animal Training - Dogs & Cats <input type="checkbox"/> Anthroposophy (Spiritual Philosophy) <input type="checkbox"/> Aqua Detox <input type="checkbox"/> Aqua Detox Medical Unit <input type="checkbox"/> Aquarian Healing <input type="checkbox"/> Aquatic Bodywork <input type="checkbox"/> Arolo <input type="checkbox"/> Arolo Tifar <input type="checkbox"/> Aromatherapy <input type="checkbox"/> Aromatherapy (Flower Essences) <input type="checkbox"/> Aromatherapy on Horses <input type="checkbox"/> Aromatic Medicine <input type="checkbox"/> Ashati <input type="checkbox"/> Aston Patterning <input type="checkbox"/> Astrology (incl. Chinese Astrology) <input type="checkbox"/> Asyra Device <input type="checkbox"/> Audio Sound <input type="checkbox"/> Aura-Soma® <input type="checkbox"/> Autogenic Training Avatar Assessment 	<ul style="list-style-type: none"> <input type="checkbox"/> BabyCalm™ <input type="checkbox"/> Bach Flower Remedies <input type="checkbox"/> Bicom Instrument <input type="checkbox"/> Biodanza <input type="checkbox"/> Bio Energetics Medicine <input type="checkbox"/> Bio Feedback <input type="checkbox"/> Biograph Assessment <input type="checkbox"/> Bioimpedance Analysis <input type="checkbox"/> Birth Skills™ <input type="checkbox"/> Body Acceptance & Appreciation for Women <input type="checkbox"/> Body Acceptance & Appreciation for Youth <input type="checkbox"/> Body Love Intuitive <input type="checkbox"/> Bioresonance Therapy <input type="checkbox"/> Biosenetics <input type="checkbox"/> Body Connect Healing <input type="checkbox"/> Body Composition Test† <input type="checkbox"/> Body Electronics Point Holding <input type="checkbox"/> Body Mind Resolution (BMR) Healing <input type="checkbox"/> Body Network & Beyond <input type="checkbox"/> Body Psychotherapy <input type="checkbox"/> Body Stress Release 	<ul style="list-style-type: none"> <input type="checkbox"/> Body Talk Systems <input type="checkbox"/> Brain Gym <input type="checkbox"/> Brainwave Optimisation® <input type="checkbox"/> Breathwork <input type="checkbox"/> Breathworks Mindfulness <input type="checkbox"/> Brennan Healing <input type="checkbox"/> Bush Flowers <input type="checkbox"/> California Flowers <input type="checkbox"/> Calmbirth® <input type="checkbox"/> Celluloid Mineral therapy <input type="checkbox"/> Chakra and Aura Therapy <input type="checkbox"/> Chakra Balancing <input type="checkbox"/> Chakra Balance - Relax.Nurture.Inspire <input type="checkbox"/> Channelling <input type="checkbox"/> Chi Kung <input type="checkbox"/> Chinese Herbal Medicine <input type="checkbox"/> Chinese Nutrition <input type="checkbox"/> CVT Crystal Vibrational Therapy <input type="checkbox"/> Cytology <input type="checkbox"/> Literation <input type="checkbox"/> Spiritual Intelligence Training <input type="checkbox"/> Alignment Modality <input type="checkbox"/> Self Pleasure Modality <input type="checkbox"/> Wayapa Wuurrk <input type="checkbox"/> Ecotherapy <input type="checkbox"/> Quantum Energy Coaching <input type="checkbox"/> The Balance Procedure <input type="checkbox"/> Divine Dragon Energy Healing <input type="checkbox"/> Holistic Somatic Healing <input type="checkbox"/> Somatic Kink <input type="checkbox"/> Soul Blueprint Coach <input type="checkbox"/> Wim Hof Method <input type="checkbox"/> Energy Coaching <input type="checkbox"/> The Empowered Tapping <input type="checkbox"/> Feminine Embodiment Arts <input type="checkbox"/> Connected Kids Modality <input type="checkbox"/> Feminine Embodiment Coaching
<p>Group 3 Continued</p>			
<ul style="list-style-type: none"> <input type="checkbox"/> Chiron Healing <input type="checkbox"/> Clairvoyants <input type="checkbox"/> Coffee/ Tea Reading <input type="checkbox"/> Color Therapy <input type="checkbox"/> Coral Essences <input type="checkbox"/> Core Energetics <input type="checkbox"/> Core Energetix System <input type="checkbox"/> Cosmos Child <input type="checkbox"/> Cranial Electronics Point Holding 	<ul style="list-style-type: none"> <input type="checkbox"/> Energetic/ Energy Healing <input type="checkbox"/> Energy Alignment Method <input type="checkbox"/> Energy Medicine <input type="checkbox"/> EQ4/Listen/Orion Assessment <input type="checkbox"/> Ergonomics <input type="checkbox"/> Esoteric Healing (Spiritual Healing) <input type="checkbox"/> Essence of Angels 	<ul style="list-style-type: none"> <input type="checkbox"/> Integrated Life Process <input type="checkbox"/> Integrated Healing <input type="checkbox"/> Internal Fitness <input type="checkbox"/> Introspective Hypnosis <input type="checkbox"/> Intuitive Card Reading <input type="checkbox"/> Intuitive Counselling <input type="checkbox"/> Intuitive Dynamix <input type="checkbox"/> Jungian Analysis <input type="checkbox"/> Karakia <input type="checkbox"/> Kryslantium Healing <input type="checkbox"/> Labyrinth Facilitation 	<ul style="list-style-type: none"> <input type="checkbox"/> OSHO Multiversity Modalities <input type="checkbox"/> OSHO Neo-Reiki <input type="checkbox"/> Palmistry <input type="checkbox"/> Palm Energy Reading <input type="checkbox"/> Parapsychology <input type="checkbox"/> Parent-Child Mother Goose Program Facilitator <input type="checkbox"/> Parent-Child Mother Goose Program Facilitator Trainer <input type="checkbox"/> Past Life Healer

<ul style="list-style-type: none"> <input type="checkbox"/> Crystal Awakening-Rachelle Charman <input type="checkbox"/> Crystal Dreaming™ <input type="checkbox"/> Crystal Energy Healing <input type="checkbox"/> Crystal Light Bed Therapy <input type="checkbox"/> Crystal Light Healing <input type="checkbox"/> Crystal O Therapy (Crystal Awareness) <input type="checkbox"/> Crystal Power Healing <input type="checkbox"/> Crystal Remote Viewing <input type="checkbox"/> Crystal Resonance Healing <input type="checkbox"/> Crystal Shamanism-Rachelle Charman <input type="checkbox"/> Crystal Sound Therapy <input type="checkbox"/> Crystal Therapy <input type="checkbox"/> Demartini Method <input type="checkbox"/> Diamond Light Practitioner <input type="checkbox"/> Direction Technique <input type="checkbox"/> Didgeree Doo Sound Healing <input type="checkbox"/> Dietary Consultant (Nutritional Counseling) <input type="checkbox"/> Diversional Therapy <input type="checkbox"/> Divine Source Enhancement Healing <input type="checkbox"/> DLF Therapy <input type="checkbox"/> Downsize Me Food Coaching <input type="checkbox"/> Dowsing (Energy Healing only) <input type="checkbox"/> Dream Work/ Interpretation <input type="checkbox"/> Drum Circle Facilitation <input type="checkbox"/> Drum Making <input type="checkbox"/> Eginton Alignment: Somatic Movement Education & Therapy <input type="checkbox"/> Egyptian Emotional Clearing Technique <input type="checkbox"/> EMF Balancing Technique <input type="checkbox"/> EMDR Eye Movement Desensitization & Reprocessing <input type="checkbox"/> Emotional Rescue® <input type="checkbox"/> Emotionally Focused Therapy 	<ul style="list-style-type: none"> <input type="checkbox"/> Essences of the Ancient Civilizations <input type="checkbox"/> Eurythmy Therapy <input type="checkbox"/> Expressive Therapies <input type="checkbox"/> Extended DISC System <input type="checkbox"/> Eye Movement Desensitization & Reprocessing (EDRM) <input type="checkbox"/> Face Readings <input type="checkbox"/> Facial Diagnostics <input type="checkbox"/> Facial Harmony <input type="checkbox"/> Feng Shui <input type="checkbox"/> Figure Diagnosis <input type="checkbox"/> Flame Tree <input type="checkbox"/> Flower Essence Therapy <input type="checkbox"/> Flower Reading <input type="checkbox"/> Free to Be Me <input type="checkbox"/> Functional Diagnostic Nutrition <input type="checkbox"/> Gem Essences <input type="checkbox"/> Geomancy <input type="checkbox"/> Gestalt Therapy (Voice Dialogue) <input type="checkbox"/> Hahnemann Healing <input type="checkbox"/> Hakomi <input type="checkbox"/> Heal Your Life <input type="checkbox"/> Heart Energetics <input type="checkbox"/> HeartMath <input type="checkbox"/> Heart Resonance Therapy <input type="checkbox"/> Hexagram of Balance <input type="checkbox"/> Holistic Energy Care <input type="checkbox"/> Holistic Healing <input type="checkbox"/> Holographic Repatterning / Resonance Repatterning <input type="checkbox"/> Homoeopathy <input type="checkbox"/> Hypnofertility <input type="checkbox"/> Hypnotherapy <input type="checkbox"/> I-Ching Readings <input type="checkbox"/> Ignite Your Spirit <input type="checkbox"/> IMI Maternity & Child Sleep Consultant <input type="checkbox"/> Ink Brush Painting <input type="checkbox"/> Inamojo <input type="checkbox"/> Inner Space Interactive Sourcing (ISIS) <input type="checkbox"/> Integrated Biodynamics <input type="checkbox"/> Integrated Self Empowerment Therapy 	<ul style="list-style-type: none"> <input type="checkbox"/> Life Field Therapy (LFT) <input type="checkbox"/> Life Sparkle <input type="checkbox"/> Lifeline Technique <input type="checkbox"/> Lightworker Practitioner <input type="checkbox"/> Listen/EQ4/Orion Assessment <input type="checkbox"/> Living Authentically® <input type="checkbox"/> Living Love <input type="checkbox"/> Mace Energy Method <input type="checkbox"/> Magnetobiology <input type="checkbox"/> Manifestation Coaching <input type="checkbox"/> Meditation <input type="checkbox"/> Mediums / Channeling <input type="checkbox"/> Meliae Intuitive Healing <input type="checkbox"/> Metatronia Therapy® <input type="checkbox"/> Mickel Therapy <input type="checkbox"/> Mind Color <input type="checkbox"/> Mind Detox Method <input type="checkbox"/> Mindfulness (Children and Adolescents) <input type="checkbox"/> Mindfulness-Based Approaches <input type="checkbox"/> Monochrome Light & Color <input type="checkbox"/> Moving Beyond Stress <input type="checkbox"/> Music Therapy <input type="checkbox"/> Myers Briggs Type Indicator Device <input type="checkbox"/> Native American Indian Drumming <input type="checkbox"/> Natural Spiritual Healing <input type="checkbox"/> Neuro Linguistic Programming (NLP) <input type="checkbox"/> Nitaai Breathing <input type="checkbox"/> Numerology <input type="checkbox"/> Nutrition <input type="checkbox"/> Nutrition for Cats and Dogs <input type="checkbox"/> Nutrition for Horses <input type="checkbox"/> Nutritional Therapies <input type="checkbox"/> Oneness <input type="checkbox"/> Oracle Card Reading <input type="checkbox"/> Orb of Life <input type="checkbox"/> Original 7 Level System of Reiki <input type="checkbox"/> Orion /EQ4/Listen Assessment <input type="checkbox"/> Orion Healing Technique <input type="checkbox"/> OSHO Meditation Instruction 	<ul style="list-style-type: none"> <input type="checkbox"/> Past Life Regression (Therapy) <input type="checkbox"/> Past, Parallel, Future Life Therapy (PPFLT) <input type="checkbox"/> Pasture Management <input type="checkbox"/> Path of Love <input type="checkbox"/> Peak States Therapy <input type="checkbox"/> Pellowah Healings <input type="checkbox"/> Phenolics <input type="checkbox"/> Phenology <input type="checkbox"/> Plant Spirit Medicine <input type="checkbox"/> Polarity Therapy <input type="checkbox"/> Power of Sound <input type="checkbox"/> Pranic Healing <input type="checkbox"/> Precognitive Therapy (Previously Souls Purpose) <input type="checkbox"/> PrimalSoul Dance Meditation <input type="checkbox"/> Prime Tuning of Cells <input type="checkbox"/> Primus Activation Technique <input type="checkbox"/> Prismology <input type="checkbox"/> Provision of Antenatal & Postnatal - (Education Only) <input type="checkbox"/> PSH Therapy <input type="checkbox"/> Psychic Artist <input type="checkbox"/> Psychics <input type="checkbox"/> PSYCH-K® <input type="checkbox"/> Psychometry <input type="checkbox"/> Psychophysical Healing <input type="checkbox"/> Qi Gong <input type="checkbox"/> Quantum Healing Hypnosis Therapy (QHHT) <input type="checkbox"/> Quantum Stress and Trauma Release <input type="checkbox"/> Quantum Healing Hypnosis Therapy <input type="checkbox"/> Quantum Vortex <input type="checkbox"/> Quit Cigarettes in 60 Minutes <input type="checkbox"/> QXCI Assessment <input type="checkbox"/> Rachelle Charman's Crystal Awakening <input type="checkbox"/> Rachelle Charman's Crystal Shamanism <input type="checkbox"/> Radical Forgiveness <input type="checkbox"/> Rapid Transformational Therapy
<p>Group 3 Continued</p>			
<ul style="list-style-type: none"> <input type="checkbox"/> Reconnective Healing <input type="checkbox"/> Red Tent Circle Facilitator <input type="checkbox"/> Reference Point Therapy <input type="checkbox"/> Rebirthing <input type="checkbox"/> Regression Therapy <input type="checkbox"/> Rekindled Ancient Wisdom <input type="checkbox"/> Relax Kids <input type="checkbox"/> Relaxation Breathing <input type="checkbox"/> Resonance Repatterning <input type="checkbox"/> Rewilding 	<ul style="list-style-type: none"> <input type="checkbox"/> Serenity Vibration Healing & Enlightenment <input type="checkbox"/> Shamanic Bodywork <input type="checkbox"/> Shamanic Healing <input type="checkbox"/> Shamanic Studies <input type="checkbox"/> Shamanism and Transformational Mask <input type="checkbox"/> Shell Essences <input type="checkbox"/> Shi Liao <input type="checkbox"/> Shifting Gears® <input type="checkbox"/> Sleep Therapy 	<ul style="list-style-type: none"> <input type="checkbox"/> Spiritual Knowledge & Philosophy <input type="checkbox"/> Sports Training (Remedial/ Nutrition, not Fitness) <input type="checkbox"/> Starflower's Spiritual Alchemy <input type="checkbox"/> Systemic Constellations <input type="checkbox"/> Tarot Card Readings <input type="checkbox"/> The Body Code <input type="checkbox"/> The Dermafield <input type="checkbox"/> The Emotional Code 	<ul style="list-style-type: none"> <input type="checkbox"/> ToddlerCalm™ <input type="checkbox"/> Tomatis Method <input type="checkbox"/> Transcendental Meditation <input type="checkbox"/> Trimetrix EQ <input type="checkbox"/> Tuning of Cells <input type="checkbox"/> Unconditional Love Healing <input type="checkbox"/> Vastu Shastra <input type="checkbox"/> Vibemered Balance <input type="checkbox"/> Vibralite

<ul style="list-style-type: none"> <input type="checkbox"/> Rhythmic Movement Training Internation (RMTI) <input type="checkbox"/> Rising Star Healing System <input type="checkbox"/> Runes <input type="checkbox"/> Ryodoraku Assessment <input type="checkbox"/> Sacred Kurradji Science & Wisdom <input type="checkbox"/> Sacred Womb Awakening <input type="checkbox"/> Samassati Color Light Therapy <input type="checkbox"/> Scerology <input type="checkbox"/> Seichim Healing <input type="checkbox"/> Sekham <input type="checkbox"/> Serenity Neuromeditation 	<ul style="list-style-type: none"> <input type="checkbox"/> Somatic Integration Therapy <input type="checkbox"/> Somatic Therapy <input type="checkbox"/> Somato Emotional Release <input type="checkbox"/> SoulLife Therapy™ <input type="checkbox"/> Soul Focused Psychotherapy <input type="checkbox"/> Soul Guidance and Sacred Mentoring (NAME CHANGE: Saraswati Healing) <input type="checkbox"/> Soul Regression Therapy <input type="checkbox"/> Sound Healing <input type="checkbox"/> Space Clearing <input type="checkbox"/> Spiritual Artist <input type="checkbox"/> Spiritual Empowerment <input type="checkbox"/> Spiritual Healing 	<ul style="list-style-type: none"> <input type="checkbox"/> The En-Orgone Method <input type="checkbox"/> The Golden Ray Initiations <input type="checkbox"/> The Inner Compass® <input type="checkbox"/> The Journey <input type="checkbox"/> The Mace Energy Method <input type="checkbox"/> The Pendulum <input type="checkbox"/> The Trust Technique <input type="checkbox"/> The Work of Byron Katie <input type="checkbox"/> Therapeutic Touch <input type="checkbox"/> Thermology <input type="checkbox"/> Theta Healing <input type="checkbox"/> Thought Field Therapy (TFT) <input type="checkbox"/> Time Line Therapy 	<ul style="list-style-type: none"> <input type="checkbox"/> Vibrational Breath Therapy <input type="checkbox"/> Vibrational Medicine <input type="checkbox"/> Vibrational Oneness <input type="checkbox"/> Wellpoint Hypnosis Method Practitioner <input type="checkbox"/> Whole Hearted Healing <input type="checkbox"/> Zenith Omega <input type="checkbox"/> ZPoint Process, The <input type="checkbox"/> Orb Genetics <input type="checkbox"/> Thrive Factor Archetype Coaching <input type="checkbox"/> SoulNar Sound Healing Energy Therapy <input type="checkbox"/> Sympathetic Reset <input type="checkbox"/> Spinal Flow Coaching
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IICT Group 4

<input type="checkbox"/> Acrylic Nails ‡ <input type="checkbox"/> Action Potential Stimulation Therapy (APS) <input type="checkbox"/> Active Release Technique <input type="checkbox"/> Acupressure <input type="checkbox"/> Advanced Skin Care <input type="checkbox"/> Advanced Clinical Weight Loss Practitioner <input type="checkbox"/> Advanced Dietary Supplements Advisor <input type="checkbox"/> Airbrush Makeup <input type="checkbox"/> Acupuncture Massage <input type="checkbox"/> Algotherapy <input type="checkbox"/> Allergy Testing <input type="checkbox"/> Animal Healing <input type="checkbox"/> Animal Homeopathy <input type="checkbox"/> Animal Osteopathy - Dogs & Horses <input type="checkbox"/> Applied Lingua-physiology <input type="checkbox"/> AromaTouch™ Technique <input type="checkbox"/> Attractor Field Therapy <input type="checkbox"/> Auro-Kinetic Training <input type="checkbox"/> Ayurveda <input type="checkbox"/> Baby Reflexology <input type="checkbox"/> Baby Rocks <input type="checkbox"/> Balneotherapy <input type="checkbox"/> Bates Method <input type="checkbox"/> Beauty Therapists	<input type="checkbox"/> B.E.ST. (Bio-Energetic Synchronization System) <input type="checkbox"/> Best System Assessment <input type="checkbox"/> Bindi Bodywork <input type="checkbox"/> Bio Energy Detox Foot Spa <input type="checkbox"/> Bio Lifting <input type="checkbox"/> Bio Magnetic Synchronization Technique (BMS) <input type="checkbox"/> Biomagnetism (Medical or Biomagnetic PairsTherapy) <input type="checkbox"/> Birth Rocks <input type="checkbox"/> Bloodscan <input type="checkbox"/> Body Scrub <input type="checkbox"/> Body Wrap <input type="checkbox"/> Bodyflow Machine <input type="checkbox"/> Bowen Therapy <input type="checkbox"/> Bowen Therapy on Animals <input type="checkbox"/> Buteyko <input type="checkbox"/> Canine Myofunctional Therapy <input type="checkbox"/> Canine Rehabilitation <input type="checkbox"/> Canine Touch <input type="checkbox"/> Cat and Canine Muscle Release Therapy (CCMRT) <input type="checkbox"/> Cathodermie <input type="checkbox"/> Certified Detox Specialist	<input type="checkbox"/> ChakraDance <input type="checkbox"/> Chakra (Energy Massage) <input type="checkbox"/> Chavutti Thirumal <input type="checkbox"/> Chi Reflexology <input type="checkbox"/> Champissage <input type="checkbox"/> Chi Nei Tsang <input type="checkbox"/> Chinese Acupressure <input type="checkbox"/> Cleopatra Skin Advanced <input type="checkbox"/> Cleopatra Skin Back Relief Yoga <input type="checkbox"/> Cleopatra Skin Face Lift Yoga <input type="checkbox"/> Cleopatra Skin Natural Face Lift Massage <input type="checkbox"/> Cleopatra Skin Natural Family Healing <input type="checkbox"/> Cleopatra Skin Hot Spot Body Rock <input type="checkbox"/> Cleopatra Skin Quantum Healing <input type="checkbox"/> Cleopatra Skin Tummy Tuck Yoga <input type="checkbox"/> Cleopatra Skin Voice and Sound Healing <input type="checkbox"/> Cleopatra Wrinkle Reduction Massage <input type="checkbox"/> Clinical Camouflage Makeup	<input type="checkbox"/> Clinical Laser Therapy (Non-thermal) <input type="checkbox"/> Collagen Facial <input type="checkbox"/> Complex Lymphatic Drainage <input type="checkbox"/> Complex Lymphatic Therapy <input type="checkbox"/> Compression Wrap <input type="checkbox"/> Counseling - Financial (Other than work requiring financial service license) <input type="checkbox"/> CPT Complex Physical Therapy <input type="checkbox"/> Craniosacral Therapy <input type="checkbox"/> Cross Fiber Mobilization <input type="checkbox"/> Cycloid Vibration Therapy <input type="checkbox"/> Cupping <input type="checkbox"/> David Therapy <input type="checkbox"/> DamselFly Transformative Healing <input type="checkbox"/> Darkfield Microscopy (Live Blood Analysis) <input type="checkbox"/> Deep Penetrating Light Therapy <input type="checkbox"/> Denas Therapy <input type="checkbox"/> Di Morrow Method <input type="checkbox"/> Dietitian <input type="checkbox"/> Doula (including Light Domestic Duties) <input type="checkbox"/> Dry Needling
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Group 4 Continued

<input type="checkbox"/> Electrical Stimulation (eg TENS) <input type="checkbox"/> Electro-Dermal Screening <input type="checkbox"/> Electrology (shortwave, diathermy and blend) <input type="checkbox"/> Electrolysis <input type="checkbox"/> Electroregeneration <input type="checkbox"/> Emmett Technique <input type="checkbox"/> Emmett Technique on Animals <input type="checkbox"/> Emotional Freedom Technique <input type="checkbox"/> ENAR Device <input type="checkbox"/> ENAR Therapy <input type="checkbox"/> Endermology <input type="checkbox"/> Epidermabrasion <input type="checkbox"/> Equine and Canine Rehabilitation and Training <input type="checkbox"/> Equine Body Therapy <input type="checkbox"/> Equine Hoof Care <input type="checkbox"/> Equine Muscle Release Therapy (EMRT) <input type="checkbox"/> Equine Myofunctional Therapy <input type="checkbox"/> Equine Naturopathy <input type="checkbox"/> Equine Photonic Therapy <input type="checkbox"/> Equine Podio-Therapy	<input type="checkbox"/> Forensic Healing <input type="checkbox"/> Functional Integration Awareness <input type="checkbox"/> Functional Medicine Health Coach <input type="checkbox"/> Function Fascial Taping <input type="checkbox"/> Galvanism <input type="checkbox"/> Gas Discharge <input type="checkbox"/> Visualisation (GDV) Camera <input type="checkbox"/> Gel Nails <input type="checkbox"/> Genetic Counseling <input type="checkbox"/> Gerontology <input type="checkbox"/> Glycolic Facial <input type="checkbox"/> Gommage <input type="checkbox"/> Halo Therapy <input type="checkbox"/> Hatchards Way <input type="checkbox"/> Healing Touch Practitioner <input type="checkbox"/> H.E.C. Remedial Therapy <input type="checkbox"/> Heller Work <input type="checkbox"/> Hemaview (Live Blood Analysis) <input type="checkbox"/> Hot Stone Therapy <input type="checkbox"/> Hydration Facial <input type="checkbox"/> Hydrotherapy <input type="checkbox"/> IFAS High Frequency Electrical Treatment <input type="checkbox"/> Indian Head Massage <input type="checkbox"/> Infra-Red Therapy	<input type="checkbox"/> Lactation Consulting <input type="checkbox"/> Lava Shell Massage <input type="checkbox"/> Life Alignment <input type="checkbox"/> Live Blood Analysis <input type="checkbox"/> Loofah Scrub <input type="checkbox"/> Looyen Work <input type="checkbox"/> Low Level Laser Therapy <input type="checkbox"/> Magnetic Therapy <input type="checkbox"/> Magnified Healing <input type="checkbox"/> Makeup <input type="checkbox"/> Manicures <input type="checkbox"/> Manual Lymphatic Drainage <input type="checkbox"/> Mary Staggs Foot Detox <input type="checkbox"/> Mask and Traditional Healing <input type="checkbox"/> McLoughlin Scar Tissue Release Technique <input type="checkbox"/> Medical Intuition <input type="checkbox"/> Meridian Psychotherapy <input type="checkbox"/> Metamorphic <input type="checkbox"/> Metatronic Energy <input type="checkbox"/> Neuro Psychological Immunity & Vibrational Medicine <input type="checkbox"/> Paraffin Treatment <input type="checkbox"/> Pedicures <input type="checkbox"/> Photonic Therapy <input type="checkbox"/> Phototherapy	<input type="checkbox"/> Neuro Skeletal Therapy <input type="checkbox"/> Neuro Structural Integration <input type="checkbox"/> Neurodevelopmental Therapy <input type="checkbox"/> Neuromodulation Technique <input type="checkbox"/> Neuro-Training <input type="checkbox"/> Niblett Technique <input type="checkbox"/> NST Equine <input type="checkbox"/> Nutritional Therapist <input type="checkbox"/> O2 Detox Foot Bath <input type="checkbox"/> O2 Detox Spa <input type="checkbox"/> Occupational Health, Safety & Ergonomics <input type="checkbox"/> Occupational Therapy <input type="checkbox"/> Oceanic Body Work <input type="checkbox"/> Onsen Technique <input type="checkbox"/> Ortho-Bionomy <input type="checkbox"/> Orthoptics <input type="checkbox"/> OSHO Craniosacral <input type="checkbox"/> OSHO Rebalancing <input type="checkbox"/> Structural Integration <input type="checkbox"/> Structural Kinesiology <input type="checkbox"/> Acupressure Release Technique (SKART) <input type="checkbox"/> Sunbeds and Solariums <input type="checkbox"/> Swiss Ball <input type="checkbox"/> Synergistic Kinesiology <input type="checkbox"/> Tapas Acupressure
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<input type="checkbox"/> Equine Raindrop Technique <input type="checkbox"/> Equine Salt Therapy <input type="checkbox"/> Equine Shiatsu <input type="checkbox"/> Equine Touch <input type="checkbox"/> Equinology <input type="checkbox"/> Equus Muscle Management <input type="checkbox"/> Esogetic Colorpuncture <input type="checkbox"/> Esoteric Chakra Puncture <input type="checkbox"/> Facial Hair Removal - Threading <input type="checkbox"/> Facial Hair Removal - Tweezing <input type="checkbox"/> Fascial Kinetics <input type="checkbox"/> Facials <input type="checkbox"/> Fango Body Treatment <input type="checkbox"/> Faradism <input type="checkbox"/> Feather Wand <input type="checkbox"/> Feldenkrais <input type="checkbox"/> FIR Blanket <input type="checkbox"/> Financial Counselling <input type="checkbox"/> Finch Therapy <input type="checkbox"/> Fingernails - Acrylic Fingernails <input type="checkbox"/> Fit Genes DNA Profiling <input type="checkbox"/> First Aid facilitator <input type="checkbox"/> Floatation tank <input type="checkbox"/> Foot and Hand Care <input type="checkbox"/> Foot Care <input type="checkbox"/> Herbal Medicine for Dogs & Cats <input type="checkbox"/> Herbal Medicine for Horses <input type="checkbox"/> Herbalism/ Herbal Medicine <input type="checkbox"/> Holistic Pulsing <input type="checkbox"/> Homotoxicology <input type="checkbox"/> Horstmann Technique <input type="checkbox"/> Hoshino Therapy	<input type="checkbox"/> Infrared Body Wrap <input type="checkbox"/> Integral Energetics <input type="checkbox"/> Intense Pulsed Light IPL <input type="checkbox"/> Interior Alignment <input type="checkbox"/> Interlinked Healing Technique <input type="checkbox"/> Ionic Foot Bath (Mary Staggs Detox) <input type="checkbox"/> Iridology <input type="checkbox"/> James Method for Asthma <input type="checkbox"/> Jin Shin Jyustu® <input type="checkbox"/> Joint Anchor Technique <input type="checkbox"/> Kahuna Bodywork <input type="checkbox"/> Kanetica™ Structural Balancing <input type="checkbox"/> Karuna Reiki <input type="checkbox"/> Ka-Tone Deep Tissue <input type="checkbox"/> Kinergetics <input type="checkbox"/> Kinesiology <input type="checkbox"/> Kyda Muscle Therapy <input type="checkbox"/> Micro Current <input type="checkbox"/> Microdermabrasion <input type="checkbox"/> Mind Energetix <input type="checkbox"/> Mora Therapy <input type="checkbox"/> Mud Treatment <input type="checkbox"/> Myofascial Release Therapy <input type="checkbox"/> Myofascial Release Therapy for Horses & Dogs <input type="checkbox"/> Myotherapy (Excluding Dry Needling) <input type="checkbox"/> NAET (Nambudripads Allergy Elimination Technique) <input type="checkbox"/> Natural Vision Improvement <input type="checkbox"/> Naturopathy <input type="checkbox"/> Neuro Muscular Transmission	<input type="checkbox"/> Physiotherapist <input type="checkbox"/> Point of Care (Live Blood Analysis) <input type="checkbox"/> Postural Integration <input type="checkbox"/> Pre & Post Natal Therapy <input type="checkbox"/> Psychosomatic Therapy <input type="checkbox"/> Quantum BioEnergetics <input type="checkbox"/> Quantum Healing <input type="checkbox"/> Quantum Soul Healing <input type="checkbox"/> Integration <input type="checkbox"/> Quantum Touch <input type="checkbox"/> Rahzay <input type="checkbox"/> Raindrop Technique® <input type="checkbox"/> Raynor Technique <input type="checkbox"/> Recreation Therapy <input type="checkbox"/> Reflexology <input type="checkbox"/> Reichian Massage <input type="checkbox"/> Reiki <input type="checkbox"/> Reiki on Animals <input type="checkbox"/> RESET (Kinergetics) <input type="checkbox"/> Roling <input type="checkbox"/> Rosen Method <input type="checkbox"/> Bodywork <input type="checkbox"/> Rotai Pain Relief (Aust) <input type="checkbox"/> Salt Scrub <input type="checkbox"/> Salt Therapy <input type="checkbox"/> Sanctum MindSpa <input type="checkbox"/> Scenar Professional Device <input type="checkbox"/> Sea Clay Body Wrap <input type="checkbox"/> Seaweed Wrap <input type="checkbox"/> Shen Therapy <input type="checkbox"/> Shiatsu <input type="checkbox"/> SimplyHealed Method <input type="checkbox"/> Slimtronic Body Toning <input type="checkbox"/> SLM Bodywork <input type="checkbox"/> Sports Therapy <input type="checkbox"/> Spray Tanning <input type="checkbox"/> Steam Sauna	<input type="checkbox"/> Technique - (TAT) <input type="checkbox"/> TAT for Weight Loss <input type="checkbox"/> TENS Machine <input type="checkbox"/> Thalasso Therapy <input type="checkbox"/> The Arvigo Techniques of Maya Abdominal Therapy <input type="checkbox"/> The Masterson Method <input type="checkbox"/> Thermal Therapy <input type="checkbox"/> Tibetan Pulsing <input type="checkbox"/> Touch for Health <input type="checkbox"/> Traditional Chinese Medicine <input type="checkbox"/> Transpersonal Crystal Healing <input type="checkbox"/> Traditional Eastern Cupping <input type="checkbox"/> Trichology <input type="checkbox"/> Trigger Point Therapy <input type="checkbox"/> Tuning Fork <input type="checkbox"/> Ultra Sonic <input type="checkbox"/> Universal Contour Wrap <input type="checkbox"/> Vega Testing (Allergy Testing) <input type="checkbox"/> Vibrational Kinesiology <input type="checkbox"/> Vibrosaun <input type="checkbox"/> Visceral Manipulation (Excluding Spinal Manip.) <input type="checkbox"/> Virbomuscular Harmonization Technique <input type="checkbox"/> Vita Flex Technique <input type="checkbox"/> Vocational Rehabilitation <input type="checkbox"/> Vodder Technique Man. Lymph. Drainage <input type="checkbox"/> Watsu <input type="checkbox"/> Weight Management <input type="checkbox"/> Weightloss Consultant <input type="checkbox"/> Zentai Therapy <input type="checkbox"/> Zero Balancing <input type="checkbox"/> First Moon Circle Facilitator <input type="checkbox"/> Water's Touch <input type="checkbox"/> Facial Emotional Therapy (with massage exclusion) <input type="checkbox"/> HeartSpeak <input type="checkbox"/> Violet Flame Healing <input type="checkbox"/> Body Flow Energetics <input type="checkbox"/> Bioelectric Meridian Massage Therapy <input type="checkbox"/> Akashic Records <input type="checkbox"/> Neuro-K Specialised Kinesiology <input type="checkbox"/> Neuro-Muscular Dynamic Integrated Health (NDIH) <input type="checkbox"/> Neuro-Muscular Dynamic Integrated Learning (NDIL) <input type="checkbox"/> WEBB for Pets Bodywork <input type="checkbox"/> WEBB for Animals Energywork <input type="checkbox"/> Cranial Relaxation Technique <input type="checkbox"/> Conscious Coding
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			<ul style="list-style-type: none"><input type="checkbox"/> The Richards Trauma Process (TRTP)<input type="checkbox"/> Somatic Education<input type="checkbox"/> Animal Assisted Psychotherapy (AAP)<input type="checkbox"/> Animal Assisted Learning (AAL)<input type="checkbox"/> Spinal Flow Technique<input type="checkbox"/> Spinal Flow Breathwork
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