



## Registration Form for Certified Reflexologists

**Please Register Me As a Certified Reflexologist with the RRCO:**

First Name:	Initial:	Last Name:
Address:		Apt/Suite #:
City:	Prov.:	P.C.:
Res.Tel #:	Bus.Tel #:	Fax #:
Email:	Teacher:	

I am certified by:

<input type="checkbox"/> Centennial College <input type="checkbox"/> Holt School of Natural Healing <input type="checkbox"/> International Academy of Natural Health Sciences <input type="checkbox"/> Joyessence Aromatherapy Centre Inc. <input type="checkbox"/> Limestone School of Natural Healing <input type="checkbox"/> Living Essentials	<input type="checkbox"/> Reflexology Training Essentials – For Healthy Living <input type="checkbox"/> Reflexology Training Ontario Inc. <input type="checkbox"/> School of Complementary Therapies <input type="checkbox"/> Steps to Health Education <input type="checkbox"/> Soul Treatments Wellness Ltd.
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**Note:** To be registered for each certificate earned (regardless of how many), a *photocopy* of **each** certificate must be enclosed with this application (or letter from the school).

The RRCO's *Admissions & Standards Committee* reviews curriculums of other schools of reflexology. As such, the list of accepted schools will be expanded on periodically.

To register, please send a copy of your valid Reflexology certificate(s) and your fee of **\$120.00** Cdn. (\$90.00 renewal fee after 1st year) payable to:

**RRCO Treasurer's Office  
 P.O. Box 84030 RPO  
 Lakeshore Road  
 Burlington, ON L7L 6S2**

Upon certification with the RRCO, you may use the legal designation RRP<sup>r</sup> and are also eligible to enroll in the discounted Professional and General Liability Insurance. See Benefits of Registration and Membership on the website.

Office Use Only

Date Received	Amt. Paid	How Paid	Verify Sent	Verify Received	Memb. #	Rec. #	Date Sent