



# ACUPRESSURE / ACUPUNCTURE & ALTERNATIVE MEDICINE INSTITUTE

(RESEARCH, TRAINING & TREATMENT)

CONDUCTS COURSES ON ACUPRESSURE, ACUPUNCTURE, CUPPING, MAGNET, SU-JOK, NAUTUREPATHY, YOGA & ALTERNATIVE THERAPIES

A-65, DC, KAMLA NEHRU NAGAR, (Nr. PRATAP NAGAR PVT. BUS STAND) JODHPUR-342 008 (RAJASTHAN)

7357692852, 9414832852 info@acupressureguru.com www.acupressure.co

Digital Alternative Therapy Software - [www.acupressureguru.com](http://www.acupressureguru.com)

## Online Alternative Therapist / Doctor / Center / Hospital / Institute Directory

(\*)

Field are mandatory (अन वरिष्ठ)

Print Form

Business Belong(s) to *		Permanent Address		
Directory Listing		Country	State/Province	
Name *		Pin/ Zip Code	City / District	
Name of Registration Office / Center / Hospital / Insttute / Firm				
Date of Birth	Age	Gender	Nationality	
Father				
Email *				
Password *				
Blood Group	Religion	Caste	Business Address	<input checked="" type="checkbox"/> Same as Permanent Address <input type="checkbox"/> Diffrent from Permanent Address
Education				
Additional Qualification				
Profession / Occupation				
Experience				
Website / FB / Other Social Media				
		Mobile No	Whatsapp No  *	
		Referred by	Recommended By	Medium
		About Us *	Payment Mode	
		Remark / Review		

This is to confirm that I wish to enroll myself . I hereby declare that above information is true to the best of my knowledge.

Submit / Signup / Next Step ▶

PHOTO:

Applicant Photo also Attached here

SIGNATURE:

Applicant Signature here:

DOCUMENT:

Applicant Document also Attached here

PAYMENT SLIP:

Applicant Payment Slip Attached here