

THE ROOTS OF CHRISTIAN MYSTICISM

Application Form

Please print name and address.

NAME _____

ADDRESS _____

TEL _____ **E MAIL** _____

PRESENT OCCUPATION _____

Brief details of any experience you could use as a base for this course.

What motivates you to apply for this course?

If you are willing to accept the course requirements:

- 1) To attend all sessions as far as possible
- 2) To work in groups of various sizes.

Please sign here.....

**Please return your completed application form and deposit of £50, cheque made payable to WCCM to:
Kim Nataraja
London Centre for Christian Meditation
St Mark's
Myddelton Square
London EC1R 1XX**