



## **BHSS BRENNAN HEALING SCIENCE SWITZERLAND**

**Schweizerischer Verband der Energietherapeuten der BBSH**  
**Association Suisse des thérapeutes énergétiques de la BBSH**  
**Associazione Svizzera dei terapeuti energetici della BBSH**  
**Swiss Association of Brennan Healing Science Practitioners**

**Application**

**Change of Contact Information**

Name:

First Name:

Street, Number:

Zip Code:

Town:

Phone (home):

Phone (office):

Phone (mobile):

Email (home):

Email (office):

Homepage:

Year of Graduation:

Qualifications (other than BHS):

Please list me on the BHSS website. Please send the contact details, the text and the photo for the website by email: [kontakt@bhss.ch](mailto:kontakt@bhss.ch)

Date:

Signature:

Please send the completed application form to:

Christof Huber  
Halen 75  
3037 Herrenschwanden