



Natural Therapies Certification Board

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CONCURRENT CERTIFICATION APPLICATION

Concurrent Practitioner

Fee: \$25 per certification.

Your certification will expire with your current NTCB certification

Please check (√) the type(s) of certification requested.

I am currently certified as:

NTCB Certified Biofeedback Tech. (CBT)	<input type="checkbox"/>	NTCB Certified Biofeedback Spec. (CBS)	<input type="checkbox"/>
NTCB Quantum Biofeedback Tech. (QBT)	<input type="checkbox"/>	NTCB Quantum Biofeedback Spec. (QBS)	<input type="checkbox"/>
NTCB Certified Pain Mgmt. Tech. (CPMT)	<input type="checkbox"/>	NTCB Certified Pain Mgmt. Spec. (CPMS)	<input type="checkbox"/>
NTCB Certified Stress Mgmt. Tech.(CSMT)	<input type="checkbox"/>	NTCB Certified Stress Mgmt. Spec. (CSMS)	<input type="checkbox"/>

Please type or print the following information.

Date:	Name (as it would appear on certificate):		
Business Name:		Website:	
Address:		City:	
State:	Postal Code:	Country:	
Home Phone:		Work Phone:	
Cell Phone:		E-Mail:	

Degree and Experience

Highest degree attained (degree and subject):
Current licenses and certificates (Please list all. If necessary, send separate copies/documents):

Credit Card Information

Fees may be paid by check or credit card. Applicants may email, fax or mail the applications to the NTCB.

Visa, MasterCard or Discover Credit Card Number: _____

CC Expiration Date: _____

Name as it appears on credit card _____

NOTE: All credit cards are handled confidentially by our secure gateway IPX Services, Inc. over their secure servers. We're sorry, but we cannot accept American Express.

Signature: _____