

FEDERATION of



Spiritual Healer
Licensing Boards

NEW

Application for Spiritual Healer License

The requirements for being licensed by one of the Boards within the Federation are to be properly certified with and accredited board/association serving your chooses profession or licensed by your state/province.

Name _____

Address _____

City _____ State _____ Postal Code _____

Home Phone _____ Cell Phone _____

Email _____ Web Address _____

You will need to provide the following with your application:

_____ I enclose copies of Certificates from Professional Practices, Ethics and Informed Consent Form

_____ I enclose copies of Certificate from the Spiritual Coaching Skills Course.

_____ I enclose a copy of my Informed Consent Form.

_____ I Enclose a copy of my written Healing Mission.

_____ I enclose a list of all my certifications and licenses related to healing.

Choose a License Board from ONE of the following with a check mark: ([Board Descriptions](#))

_____ Alliance of Christian Healers _____ Fellowship Modern Essenes Board

_____ Independent Science of Mind Fellowship _____ Licensed Spiritual Healer Council

_____ Quantum Healing Hands Fellowship _____ Quantum Healer License Board

_____ Reiki License Commission _____ Spiritual Healer License Board

_____ Spiritual Health Coach License Board

Informed Agreement:

By completing and signing this application, I warrant that I am qualified to practice in the public domain by virtue of having the proper license or certification to do so. I also understand any license I have allows me to practice only in the state or province that issues my license. I further understand that certification thru an accredited certification agency is valid only in those states and provinces that do not license my profession – unless I am properly licensed.

I understand that the public domain is governed by the state or province and the federal government where I reside. While I am practicing in the public domain I am under the jurisdiction of these governments and required to obey their laws.

I promise to remain properly credentialed while I am licensed as a spiritual healer.

I acknowledge that the spiritual healer license I am requesting will allow me to work in the private domain as a spiritual healer. I understand that the private domain is governed by the Bill of Rights in the United States Constitution in the US. While I am practicing in the private domain I am under the jurisdiction of these documents and the ecclesiastical organization standing behind my Spiritual Healer License

Date _____

Signature _____

Filing Requirements:

- Print the application, complete and sign it.
- Compile all the additional documentation requested.
- **Application:** Mail the application and any additional documents to: **FSHLB - 507 Old Toll Circle, Black Mountain, NC 28711.**
- **Payment:** Mail your Check, Money Order payable to FSHLB for **\$65.00** (1 year) to: **FSHLB c/o 5/3rd. Bank 128 Montreat Rd. Black Mountain, NC 28711**

Contact: info.healers@gmail.com