



FSHLB – FME, 8417 Oswego Road #131
Balwinsville, NY 13027
888-661-6361

RENEWAL OF AN ESSENE SPIRITUAL HEALER LICENSE

Name _____

Address _____

Phone _____ Email Address _____

List any certifications and licenses currently held: _____

I, (name to be used on certificate) _____ hereby warrant and affirm that I have completed the requirements to become a Licensed Essene Spiritual Healer.

Signature _____ Date _____

Please enclose your check or money order in the amount of \$45 US or pay online using the secure and confidential credit card gateway provided by [IPX-Natural Therapies](http://IPX-Natural-Therapies) for the benefit of the Fellowship of Modern Essenes. You may Fax this application to 888-6616361 or mail it to: FME-FSHLB, 8417 Oswego Rd #131, Baldwinsville, NY 13027. You may also send it as an attachment to fme@fshlb.com