

VHC Co-op Application

Name Phone Number Email Address

Training / Education

Describe Current Practise (please include average treatments per week)

Intention in Joining the VHC Co-op? (please include why you feel you would be a good fit)

Please review the VHC vision, philosophy and values prior to interview. Suitable applicants will be contacted to arrange a tea interview in the space. Thank you for your application.

Warmly,

VHC Co-op