



Caley's

APOTHECARY



- Part of The Medical Herbalist London -

PRACTITIONER STUDENT DISCOUNT APPLICATION FORM

The Practitioners/Student Discount Card is to enable practitioners and students of natural medicine to purchase some of the remedies that they use in their practice at a discount. To join the scheme you will need to send us the completed application form together with a copy of your qualification and insurance certificates or letter from your college, stating the date the course ends. We will then issue you with a Practitioners/Student Discount Card. If you present this card with your order at Caley's Apothecary, Clapham, London you will be entitled to a 20% discount on the purchase of selected products. Discounts are also available from our Mail Order service at www.CaleysApothecary.co.uk if you quote your Practitioner/Student Discount Card code with your order. The scheme is only open to UK residents.

The discount is available on all of our own brand range, including organic dried herbs & tea blends, base oils, macerated oils, essential oils, flower waters, own gift sets & more (please enquire). You may receive 10% off all products by other brands that we stock. If you require further information contact 020 3730 4578 or 07508 793 166. You may also email info@caleysapothecary.co.uk. Please complete the form below and return to:

Caley's Apothecary, Practitioners/Student Discount Card, 151-153 Clapham High Street, London. SW4 7SS (Form and required information may also be brought into Caley's Apothecary, or emailed in, to info@caleysapothecary.co.uk)

I wish to apply for a Caley's Apothecary Practitioner/Student Discount Card.

I enclose copies of my (please tick):

(Qualified practitioners only) - Copy of qualifications and Insurance Certificate ☐

OR (Students only) - Letter from College (inc. end date) ☐

Name: _____

Ms/Mrs/Mr/Other (Please state): _____

Home Address _____

Post Code. _____

Telephone. _____

Email _____

Preferred Method of Contact? _____ Please see our privacy policy online)

Qualifications: _____

Clinic/Place of Course Address: _____

T: 020 3730 4578 M: 075 0879 3166
sales@caleysapothecary.co.uk

Visit us online at www.caleysapothecary.co.uk

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Therapy/Therapies practiced: _____

How many years have you been practising/studying? _____

Which products from other companies do you use in your practice? _____

Are there any products that you would like to see included in our range?

How did you hear about Caley's Apothecary? _____

How did you hear about the Practitioner/Student Discount Card? _____

Please indicate which mailings you would like to receive:

All ☐

Catalogue ☐

None ☐

Applicant:

Signed: _____

Date: _____

Previous card number: _____

OFFICE USE ONLY:

Prac/Student Discount Card Code: _____

Expiry Date: _____

Comments: _____

T: 020 3730 4578 M: 075 0879 3166
sales@caleysapothecary.co.uk

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