



Thank you for your interest in attending the Nutrition Network Professional Training.

The Nutrition Network is an education and learning platform founded by The Noakes Foundation in partnership with their extensive network of doctors and scientists. The platform is designed exclusively for medical practitioners and allied health workers across all disciplines, and will cover the latest and most up-to-date science and research in the field of Low Carb nutrition.

The platform will start with a 2 day **Professional Training in LCHF / Ketogenic Patient Treatment** on 9<sup>th</sup> & 10<sup>th</sup> February 2018.

Attendance at the conference is exclusively for medical professionals and allied health workers and spaces are limited for this initial conference - this is in an attempt to create an intimate and specialized network of like-minded doctors and allied health workers who can share insights and resources throughout the 2 day event.

Attendance is through application only, you may apply if you fall into one of the below categories:

You are a

- Registered Doctor
- Registered Dietitian
- Registered Nutritionist
- Banting Coach
- Hold a certificate in Mind / Body Medicine / are a Mindfulness/ Wellness Coach

*\*Registered with a recognized institution, either Nationally or Internationally*

#### **Details of the Conference:**

**Date:** 9<sup>th</sup> & 10<sup>th</sup> of February 2018

**Time:** 08.30 - 17.00

**Venue:** The Vineyard Hotel, Colinton Rd, Newlands, Cape Town, 7700

**Cost:** ZAR 4600 – Discounted rate of ZAR 3600 if payment is made before 20 January 2018. *Payment to be made only once application is accepted*

Please complete the accompanying Professional Training Application Form - you will be notified via email whether your application has been successful.



### Nutrition Network Professional Training Application Form

We thank you for your interest in attending the first Nutrition Network Professional Training. Please fill in the applicant screening form below - confirmation will be sent if your application has been successful and places are confirmed on receipt of payment.

Name

First

Last

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Email

Phone

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Occupation & Registration Number (if applicable)

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Organization/Practice Name (if applicable)

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Tell us about yourself / Comment on your interest in Low Carb High Fat and share your experiences of implementing this in practice until now?

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Would you like to receive our monthly newsletter?

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Note: Completion of this form does not confirm your place at the conference, please await an email confirming your attendance.