



PATH

Professional Academy of Therapeutic Hypnosis

IACT Certified Hypnotherapist
Foundational Training Program

Fall 2026 - Spring 2027
with Alana Belik, CHt, CMT, CSMC, RTT

Welcome!

Dates:

Sept 19, 26
Oct 3, 17, 24
Nov 7, 21
Dec 5, 19

Jan 9, 23
Feb 6, 20
Mar 6, 13
Apr 3, 24
May 1, 15, 29

Times:

9 AM - 1 PM Pacific Time
10 AM - 2 PM Mountain Time
11 AM - 3 PM Central Time
12 PM - 4 PM Eastern Time

There will be a 30 minute break at approximately:

10:30 AM Pacific Time
11:30 AM Mountain Time
12:30 PM Central Time
1:30 PM Eastern Time

Location:

Zoom Training Room <https://us02web.zoom.us/j/87369905594>

Zoom Training Room ID: 873 6990 5994

Tuition:

Tuition Includes:

- Digital Student Manual
- Digital Ethics Manual
- Self Study “Practical Life Coaching” Course by the PATH
- Extra PATH proprietary protocols and resources
- 1:1 time with Alana during designated office hours, should you require extra support, throughout the duration of the program

Plus, upon successful completion, you will receive:

- Certification, including a hard copy certificate and a digital badges from IACT
- Certification, including a digital certificate and badge from the PATH
- Marketing Materials, such as videos, questionnaires, and a “Find a Therapist” listing on the IACT website
- A free “Find a Therapist” listing on the PATH website
- Access to member only resources on the IACT website, such as hundreds of hypnosis scripts, articles, videos, and professional forms and letters
- A free quarterly subscription to “Unlimited Human” magazine physically mailed to your postal address
- Opportunities to present to the IACT and PATH communities, in person and online
- Free access to monthly IACT Chapter meetings
- Free access to PATH monthly Therapists Live Connect (TLC) Meetings
- 1 Year Certified Membership with IACT (International Association of Counsellors and Therapists)

STUDENT AGREEMENT

- To support a successful learning experience for all students, live online attendance is required for scheduled classes. If you are unable to attend due to planned or unexpected circumstances, please notify Alana as soon as possible so appropriate arrangements can be discussed.
- Students are expected to participate in class with their camera on.
- An additional 110 hours of self-study, or an approved equivalent, must be completed by November 29, 2027.
- Successful completion of the program includes completion of a written Ethics Review and Final Exam.
- A valid photo ID must be provided for certification purposes.
- Confidentiality is essential. Teaching may include real-life case studies, class discussion, personal reflection, and professional examples. Students are expected to respect the privacy of all individuals and information shared within the training environment.
- Recording of classes, discussions, demonstrations, or teaching materials is not permitted.
- Students are expected to maintain a professional, respectful, and supportive attitude during class and in all course-related communications.
- If you choose to withdraw from the course, written notice must be provided by September 25, 2026, in order to be eligible for a refund. After September 25, 2026, tuition is non-refundable.
- If you need to withdraw after September 25, 2026, due to a medical situation or other emergency, a credit may be applied toward a future PATH course.
- If a student is not able to meet the terms of this agreement, PATH reserves the right to review their continued participation in the program. In some cases, this may result in removal from the course. Tuition obligations remain in effect according to the refund and withdrawal policy outlined above.

This course is structured on a nurturing and supportive model, however cannot stand in for an individual's need for therapy. Responsibility for your emotional well-being remains with you as the student; and, participation in the course is with your full and informed consent. Cooperation, inclusivity and compassion are pillars of this course and all are asked to act within this value system. Thank you.

Student Name

Student Signature

Date

- Please fill out your full name below as you would like it to appear on your certificate
- Please fill out your postal address where you would like your certificate mailed
- Please fill out your email address with the email that your would like IACT to use to contact you
- Please send a copy of your photo ID to Alana at info@thehypnosispath.com

Full Name:	
Address:	
City/Town:	
Province/State:	
Country:	
Postal/Zip Code:	
Email Address:	
Phone Number:	

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