**Life Changing Courses Affiliate Program**

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| **Personal Information** |  |
| Full Name: |  |
| Email address: |  |
| Contact number: |  |
| Country: |  |
|  |  |
| **Website and marketing channels** |  |
| Website URL (if applicable): |  |
| **Social Media Profiles** |  |
| Facebook |  |
| Instagram  |  |
| X (Twitter) |  |
| Linkedin  |  |
| TikTok |  |
| Other |  |
|  |  |
| **Tell us about your audience** |  |
| Describe your audience or followers and their interests: |  |
| How Will You Promote Our Courses? |  |
| Describe your promotional strategy for our courses (e.g., blog posts, social media, email newsletters, etc.): |  |
|  |  |
| **Additional Information** |  |
| Have you participated in other affiliate programs before? If yes, please provide details: |  |
| Why are you interested in promoting Life Changing Courses? |  |
| **Agreement**By submitting this application, I acknowledge that I have read and understood the terms and conditions of the Life Changing Courses Affiliate Program. I agree to adhere to ethical promotion practices and the guidelines outlined in the program. I understand that the information provided in this application will be used for review and communication purposes related to the affiliate program.Signature:Your Full Name: Date: |
| **Submission**Please email this completed application form to info@lifechangingcourses.co.za our team will review your application and contact you with further instructions if you are approved to join the affiliate program.Thank you for your interest in the Life Changing Courses Affiliate Program. We look forward to the opportunity to collaborate and make a positive impact together! |