



## Perfumotherapist Certification Application

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Website \_\_\_\_\_

I, \_\_\_\_\_, agree to practice Perfumotherapy as defined by the International Perfume Foundation found on the IPF website:  
<https://www.perfumefoundation.org/standards.html>

I also agree to feature the IPF logo and the New Luxury Code logo on my home/about or mission page.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**IPF Certification Fee of 200 Euros will be invoiced by IPF via PayPal**

### Send Application to:

**IPF Paris**  
**49 Quai des Grands Augustins**  
**75006 Paris**  
[cc@perfumefoundation.org](mailto:cc@perfumefoundation.org)

### For IPF Only

Approved: \_\_\_\_\_ Date \_\_\_\_\_ By \_\_\_\_\_

Certification Term: \_\_\_\_\_