

MINDFULNESS COURSES - POSTAL BOOKINGS & CHEQUE PAYMENTS

To return your booking form through the post and make your payment by cheque, please print and complete the application form below and return it with your payment. Once payment is received, I can confirm your place.

Please complete the booking form below as fully and accurately as possible. Please make cheques payable to Wendy Broad and write the course name and date on the back of your cheque.

Return address:

Wendy Broad
15 The West Wing,
Bostock Hall,
Middlewich
Cheshire
CW10 9JN

Course details can be found on the website. Please check the final date for sending cheques. On-line booking forms may be accessed through the website if you prefer to make your payment by on-line bank transfer.

PLEASE NOTE:

All information is used for assessment of course suitability only. Any information given is strictly confidential and will be seen only by myself, Wendy Broad and if necessary discussed with my supervisor. It will be kept according to data protection legislation and will be destroyed after 5 years as a condition of my insurance.

Please feel free to contact me if you need more information.

*Many thanks,
Kind regards,
Wendy*

MINDFULNESS COURSE APPLICATION FORM

COURSE TITLE:

VENUE:

START DATE:

Name:

Home address:

Postcode:

Home Phone:

Mobile:

E-mail:

What are your preferred contact arrangements?

Emergency contact number:

Your GP's name & address:

Where did you find out about this course?

Tell us about you

1) What has brought you to choose this particular course? Please outline briefly.

2) Please give details of any previous **mindfulness courses, training or retreats** you have attended.

- 3) Are you comfortable to work alongside others in a group situation? Groups vary from 8-12 participants.

- 4) Please could you give details of any stressful life events you have experienced in the last few years which could make the course difficult for you, such as physical or emotional trauma, bereavement, job loss, divorce or separation.

- 5) Do you experience acute or debilitating depression or any other mental health conditions? If so, please can you say a little more about this?

- 6) Are you able to practice mindfulness techniques for at least 20 minutes per day?

- 7) Do you have any particular needs that it would be useful for us to know about e.g. restricted mobility, hearing or visual impairment?

- 8) Are there any questions or other information you would like to pass on to the teacher in connection with this application?

Please sign the course agreement over the page, thanks.

Mindfulness Course Agreement

I understand that this is an experiential course and is not group therapy or group counselling.

I agree to take care of myself as best as I can during the course and observe the guidelines and instructions throughout.

I understand that I will be noticing my thoughts, emotions, feelings and bodily sensations and if difficulties arise I will seek help from a counsellor, psychotherapist or other medical professional.

I agree to inform the teacher by text, phone or email if I cannot attend a session.

I understand that all course fees must be pre-paid in advance at the time of making the application and if the teacher decides that the course is not suitable for me at this time or prior to commencement, my payment will be refunded promptly.

Cancellation Policy

I understand that if a cancellation is made, refunds are not possible within 6 weeks of the start date. Once the 8-week course has started, refunds are not possible. The payment will be refunded if the course is cancelled.

Participant's Signature:
(a computer-generated signature is fine)

Date:

Teacher's Signature:

Date: