

## **MINDFULNESS COURSE BOOKING INFORMATION**

To confirm your place, please complete the booking form below and return with your payment, preferably by on-line banking. If on-line banking is not possible, payment can be made by cheque or cash. The details are below. Once I have received your payment, I will confirm your place. Please feel free to contact me if you would like help with completion of the booking form or would like the course booking form to be posted to you. Many thanks.

*Kind regards,*

*Wendy*

## **PAYMENT INFORMATION**

### **1) Payment by Bank Transfer**

Please return the form by email or through the post when you have made your payment, thanks.

#### **Bank details:**

Sort code: 11-05-70 (Halifax)

Account: 00091218

#### **Reference:**

- Mindfulness Based Stress Reduction courses - MBSR and your name
- Mindfulness for Stress Relief and Wellbeing courses - MFS and your name
- Mindfulness for Health courses - MFH and your name

### **2) Payment by Cheque**

To 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. The closing date for receipt of cheques is two weeks before the course start date. Please make cheques payable to Wendy Broad and write the course name and date on the back of your cheque, thanks.

#### **Address for Postal Payments:**

Wendy Broad

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

### **3) Payment by Cash**

Please contact Wendy to arrange payment by cash.

## **BOOKING FORM INFORMATION**

Please complete the booking form below as fully and accurately as possible and sign the course agreement. 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.

## **MINDFULNESS COURSE BOOKING 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?**

### **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) For group courses, are you comfortable working alongside others in a group situation? Groups vary from 8-14 participants. You will be asked to talk in pairs from time to time, but do not need to contribute to larger group discussions. Please answer Yes or No.

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. If you have not experienced stressful life events please write None.

5) Do you experience depression, anxiety, pain, fear or avoidance of certain situations or any other mental health conditions? Please answer Yes or No.

6) For MBSR courses, you are encouraged to spend 45-60 minutes per day practising mindfulness meditation and for Breathworks courses you are invited to spend 10-20 minutes per day on home practice. Is this something that you are willing to do? Please respond with Yes or No.

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? If there are none, please respond with None. Thanks.

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

## **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, including becoming aware of my breath 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 booking and if the teacher decides that the course is not suitable for me prior to commencement of the course, my full payment will be refunded promptly.

I understand that for courses with an orientation session, if it becomes clear at the orientation session that the course is not appropriate for me, my payment may be refunded minus a fee of £45 (to cover session and administrative costs) or I can transfer my place to a later course. Once the 8-week course has started, refunds will not be made.

### **Cancellation Policy**

If a cancellation is made more than 5 weeks before the course start date the course fee will be refunded less a £25 administration fee. Within 5 weeks of the course start date, course refunds will only be made under the circumstances in the above course agreement. Once the 8-week course has started, refunds are not possible. The payment will be refunded if the course is cancelled.

### **Data Protection Policy and Privacy Policy**

I have read and agree to the [Data Protection Policy and Privacy Policy](#).

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

**Date:**

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

Many thanks,

Kind regards,

Wendy