

Mindfulness for Health Registration Form

Tell us some basic information



Course Title/Date *

Full Name *

First Name

Last Name

Date of Birth

Month

Day

Year

Gender

Ethnicity

E-mail *

Address *

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Country

Mobile Phone *

Home/work phone

<input type="text"/>	<input type="text"/>
-	Phone Number
Area Code	

Please provide contact details for who we should contact in case of an emergency when attending a programme with us.

Emergency Contact Name *

Emergency Contact Number *

<input type="text"/>	<input type="text"/>
-	Phone Number
Area Code	

GP Name *

GP Phone no. *

<input type="text"/>	<input type="text"/>
-	Phone Number
Area Code	

Tell us about you



To help us to ensure that this course meets your needs at the present time, please take a little time to answer the following questions:

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

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

Are you OK to work alongside others in a group situation? (Please note that group size varies)

Are you able to practice mindfulness exercises/techniques for at least 20 minutes per day for the duration of the course?

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

We will be giving out additional recordings during the course. Which format would you like these on? *

- CDs
- Memory stick
- A download link (emailed to you)

Please add any other comments here

Payment Information



Please select which rate you will be paying. On each course, we offer a limited number of concessionary rates for people with significant financial hardship.

Payment Option *

- Organisation
- Individual
- Concession

Please select whether you would prefer to pay the full amount, or a deposit with the remaining balance at a later date.

For deposit payments, the remaining balance is payable 2 weeks before the start of the course.

Payment Method *

- Full
- Deposit

Keeping in touch	◀
Submit your form	▼

Thank you for taking the time to complete this registration. You now need to hit the "Submit" button then please use the link below to pay your £50 deposit.

[Submit](#)