

PRIVATE & CONFIDENTIAL



Application for Mindfulness Based Stress Reduction Course

Name

Address

Email

Home Phone:

Mobile phone :

Date of birth:

Occupation:

Have you any physical disability that requires special consideration? E.g. wheel- chair access, etc

Do you have any health issues that the course facilitator should be aware of?
E.g. allergic reactions, epilepsy, asthma, blood pressure problems, etc.

Are you currently on any prescription medication?

If so, please specify:

Have you recently (in the last 12 months) experienced any difficult life events such as bereavement, divorce, job loss, acute illness and/or its treatment, any major events or stressful change such as moving house?.

Do you anticipate any difficult life events (as above) in the near future?

Please indicate the name and contact details of your G.P. and/or another person that can be contacted in case of a health or safety issue:

Please state briefly your reasons for wanting to take a Mindfulness course at this time:

Where did you hear about this course? _____

Signature of participant:

Date:

In order to secure your booking, please return the completed application form together with a cheque or postal order for €100 non refundable deposit (no cash please) to:

Eilis Cullen
13, Castlepark Road
Dalkey
Co. Dublin.

Or contact Eilis for bank details to make an online payment.

Mobile: 086/8622012
Email: eilis@mindfultherapy.ie.
www.mindfultherapy.ie