Kim Johnson, L.C.S.W.

EMDR International Association Approved

Consultant & Trainer

www.TransformYourLifeCounseling.com

Registration Form: Healing Children Through

Integrating Play & Art Therapy with EMDR

Dates: March 22, 2024 – 8:30am to 4:30 pm

Location: Springhill Suites Roseville, 10593 Fairway Drive

 Roseville, CA. 95678

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Registration Fees - $199 per person**

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| --- | --- | --- |
| Please sign me up! |   | $ 199.00 |
| Add additional person(s) |  @ 199 per person |  |
|  |  Total amount due: |   |

Please make your check payable to “Kim Johnson, L.C.S.W.” Paying by credit card?

Credit Card #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Exp. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name as it appears on your card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Three-digit code on back: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Terms & Conditions:

* Attendance at an entire program is required for CE Credit. No partial credits will be awarded for any program.
* Please register early and arrive before the scheduled start time. Space is limited.
* Registrants cancelling up to two (2) weeks before the workshop will receive a tuition refund, less a $50 administrative fee. No refunds for less than 72 hours cancellation.
* A $35 service charge applies to each returned check.
* All trainings are held in facilities in accordance with the Americans with Disabilities Act. If special accommodations are required, please notify the trainer 72 hours in advance.
* Note temperatures in meeting rooms are variable, please dress in layers.

\*\*Return this completed Registration Form with your payment to:

Kim Johnson, L.C.S.W., Transform Your Life Counseling,

2140 Professional Drive, Suite 205, Roseville, CA 95661

Questions? Call our office at 916-780-2575\*\*