**Application Form  
for**

Msc Teacher Training Course: Mindful Self-Compassion  
Held in the beautiful setting of the Ammerdown Retreat Centre, near Bath, Somerset  
17th February – 23rd February 2019  
***Lead by Steve Hickman and Vanessa Hope***

By providing the below information and submitting the registration you agree for Sussex Mindfulness Centre (SMC) to store your information on their secure system and share it with the SMC team members to both administer and deliver the required training. Please note that the name you provide here will be used on your CPD certificate.

Please read the supporting information about this training carefully. The application process is in 3 stages:

1. Completion of this registration form and payment of £300 deposit to Sussex Mindfulness Centre (SMC). You will be invoiced for the deposit once we have received this form.
2. Completion of the Centre for Mindful Self-Compassion (CfMSC) online application form which will be reviewed by the trainers. You will be sent a link to complete this once the deposit has been received.
3. Provided your application is accepted, you will then be invoiced for payment of the balance to SMC. Once this payment is received, you will receive a confirmation of your place.

Should your application in stage 2 not be accepted, you will be refunded your deposit. Under any other circumstances, your deposit is non-refundable.

This form represents the registration process (stage 1).

Please provide the following information:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Title** |  | **Forename** |  | **Surname** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Date of Birth** *(DD/MM/YYYY)* |  | **Gender** |  |

|  |  |
| --- | --- |
| **Address 1** |  |
| **Address 2** |  |
| **Address 3** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **County** |  | **Postcode** |  | **Country (if not UK)** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Phone** |  | **Email** |  |

|  |  |
| --- | --- |
| **Do you have any special dietary requirements? Enter YES or NO** |  |
| *Please provide details below…* | |
|  | |

|  |  |  |
| --- | --- | --- |
| **Do you have any logistical or practical requirements? Enter YES or NO** |  | |
| *Please provide details below (please also see supporting information)* |
|  | |

|  |
| --- |
| **Accommodation:**  *Please check (X) against your room preference and payment from one of the 4 options below…* |

|  |  |  |
| --- | --- | --- |
| **Payments before 29th June (early bird rate)** | | |
| 1. Single occupancy room: £1,500 |  |

|  |  |
| --- | --- |
| 1. Shared (twin or double) occupancy: £1,400 |  |

|  |  |  |
| --- | --- | --- |
| **After 30th June (balances must be paid in full by 1st December 2018)** | | |
| 1. Single occupancy room: £1,600 |  |

|  |  |
| --- | --- |
| 1. Shared (twin or double) occupancy: £1,500 |  |

|  |
| --- |
| **If you wish to share a room, please state with whom below**  *indicating whether twin or double is required* |
|  | |

|  |  |  |
| --- | --- | --- |
| **Please enter balance due at stage 3 of application process**  *(this is the cost of your room above minus £300 deposit)* | £ |  |

**Bursary Information**

|  |
| --- |
| If you have special financial circumstances and wish to apply for a bursary, please state here. We would like to make this training available to as many people as possible. However, please note there are a very limited number of bursaries. If you check (X) in this box you will asked to complete an essay explaining your circumstances, as stated in the supporting information. Decisions on bursaries will be made in December 2018. |

|  |
| --- |
|  |

**Where did you find out about this event?**

|  |
| --- |
|  |

**Declaration**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| I confirm I have read, understood and agree to the payment and cancellation arrangements in the supporting information and wish to apply for the above event. Enter YES or NO | | | | |  |
| Signed: |  | | |
| Date: *(DD/MM/YYYY)* | |  |

Now please send this form to [smc@sussexpartnership.nhs.uk](mailto:smc@sussexpartnership.nhs.uk).

Many thanks !