

## WORKSHOP REGISTRATION

PART A: Participant Information					
Write in the information of the person who will be in attendance.					
<b>Full Name:</b>		<b>Date:</b>			
<b>Address:</b>					
<b>City:</b>		<b>State:</b>		<b>Zip Code:</b>	
<b>Phone Number:</b>					
<b>E-Mail Address:</b>					

<b>Licensure Type:</b> (Circle One)	1. Psychologist    2. Counselor    3. Social Worker 4. Marriage and Family Therapist    5. Chemical Dependency    6. Other
<b>License Number:</b>	

PART B: Workshop Information			
Select the session(s) that you would like to attend.			
Select	Price	Date of Workshop	Title of Workshop
	<b>\$165.00</b>		Part I: Introduction to DBT Group Skills
	<b>\$165.00</b>		Part II: Advanced DBT Group Skills
	<b>\$165.00</b>		Part III: DBT Individual Treatment
	<b>\$165.00</b>		Part IV: DBT Advanced Individual Treatment
	<b>\$600.00</b>	<b>Save \$60 if you register for all 4!</b>	All 4 Sessions (Please write in the dates above)
<b>Total:</b>	<b>\$</b>		

## WORKSHOP REGISTRATION

<b>PART C: Payment Information</b>			
<b>I am Paying By: (Check One)</b>	<b>Check</b>		<b>Credit Card</b>
If you are paying by check, please fill out <b>Part C1</b> and include it in the envelope with this registration. If you are paying by credit card, please fill out <b>Part C2</b> .			

<b>PART C1: Check Information</b>			
To be completed only if paying by check. Please be sure to sign the check.			
<b>Name on Check:</b>		<b>Check Number:</b>	

<b>PART C2: Credit Card Information</b>					
To be completed only if paying by credit card. We can only accept Visa, Master Card, American Express, and Discover Cards with billing addresses in the United States as forms of payment.					
<b>Card Type:</b>		<b>Name on Card:</b>			
<b>Card Number:</b>					
<b>Expiration Date:</b>		<b>CVV:</b>		<b>Billing Zip Code:</b>	
<b>Total Amount to be Charged:</b>	\$				
<b>Authorized Signature:</b>					

Upon completing this registration form, please mail it to the address listed below. If you are paying by check, please include the check in the envelope with this registration.

DBP Training and Consulting  
 P.O. Box 14810  
 Copley, OH, 44321