

2012 Summer Intensive Training Workshops Registration Form

Please check one:

Note: Tier 1 and Tier 2 cannot be taken during the same summer. A minimum of six months is required between Tier 1 and Tier 2.

Tier 1: July 19 - July 21, 2012

Tier 2: August 1 – August 3, 2012. Date you attended Tier 1: _____ location: _____

Enrollment is limited! Be sure to sign up early to ensure your space. Please note that registration is complete when registration form and payment are received. If a group is attending, kindly complete a registration form for each member of the group.

Title: " Mr. "Mrs. "Miss. "Dr.

Name (please print legibly) _____ **Degree** _____

Workplace _____ **Position:** _____

Mailing Address _____

City _____ **State** _____ **Zip Code** _____

Telephone _____ **Fax** _____

Email Address (necessary for confirmation and updates) _____

Occupation: " Psychologist " School Psychologist " Occupational Therapist
 " Psychiatrist " School Counselor " Speech Therapist
 " Social Worker " School Administrator " Speech and Language Pathologist
 " Mental Health Clinician " Educator " Other _____

Tuition: _____ \$595/person
 _____ \$500/person (groups of five or more)
(Tuition is nonrefundable. Substitutions are permitted.)

Payment Method: (check one)
 _____ Check payable to "Think:Kids at MGH"
 _____ P.O. (must be attached). **Payment must be received prior to the training**
(Sorry, we are unable to accept credit card payments)

CEUs / Certificate of Attendance

Certificates will be distributed at the end of the training to those who complete the training in its entirety.

Please indicate how you would like your name to appear on the certificate:

Please check off the appropriate box and include your license number below:

CEU's requested:

" LMHC lic# _____ " LMFT lic# _____
 " LICSW/LCSW lic# _____ " Psychologists (CEs) lic# _____
 " Educators (PDPs) lic# _____ " Nursing lic# _____

A Certificate of Attendance will be provided for all other disciplines which may be submitted to the appropriate organization for consideration.

Please send payment and registration form to:

Think:Kids

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 Tel: 617-643-6030, Fax: 617-643-9715