

Scarborough Psychotherapy Training Institute

Participation in Open Workshops

Thank you for your interest in attending an open workshop at SCPTI, which may also be counted towards continued professional development.

It would greatly assist us if you would kindly complete the details below and return to the office to secure your place.

If you are currently in therapy we request you indicate below the support of your therapist for your participation in the workshop, not least so that we do not inadvertently book in both client and therapist to the same workshop.

Name:

Address:

Tel nos:

Email:

Deposit/full fee (cheques payable to SCPTI) Amount £

Name and date of workshop:

Briefly state your interest in attending this workshop at this time:

If you are currently in therapy/counselling please indicate whether your therapist supports your participation in the workshop:

The workshop will run from 9.30 – 5.30, at 117 Columbus Ravine, unless stated otherwise.

The deposit is non refundable and the balance must be paid in full if cancellation takes place within 28 days of the workshop. This will help us ensure that a workshop is not jeopardised for other participants by late cancellations.

Please return to: Scarborough Psychotherapy Training Institute,
117, Columbus Ravine,
Scarborough.
YO12 7QU