

MINDFULNESS 4 WELLNESS
BOOKING FORM
Groups & One to One Mindfulness Courses

Tell us some basic information

COURSE	
Title	
Start Date	
YOUR DETAILS	
First Name	
Last Name	
Age	
Gender (M/F)	
Email Address	
Street Address	
Town/City	
County	
Postcode	
Mobile Phone	
Home/Work Phone	

Please provide contact details for who we should contact in case of an emergency when attending a course with us:

Contact Name	
Contact Number	

Tell us about you

To help us ensure this course meets your needs at the present time, please take a little time to answer the following questions:

What has brought you to choose this course? Please outline briefly.

Do you currently experience acute depression or any other mental health conditions? If so, can you please say a little more about this?

Are you OK to work alongside others in a group situation? (Please note that group size varies between 4 and 12 people)

Are you able to commit to practice mindfulness practices for at least 30 minutes per day for the duration of the course?

Do you have any particular needs that it would be useful for us to know about (e.g. restricted physical mobility, hearing or visual impairment)?

ADDITIONAL RECORDINGS

*We will be giving out additional recordings during the course.
Which format would you prefer these on?*

Format	Tick / X
ONLINE DOWNLOADS (included in the course fee)	
USB STICK (£5 in addition to the course fee)	
COURSE CDs (£13 in addition to the course fee)	

ADDITIONAL COMMENTS

Please add any additional comments you would like to share with us, here:

PAYMENT INFORMATION

Please select which rate you will be paying. On each course, we offer a limited number of concessionary rates for people with significant financial hardship.

Payment Options *(please tick/cross which)*

Organisation	
Individual	

Please select whether you would prefer to pay the full amount, or a deposit (with the remaining balance at a later date). For deposit payments, the remaining balance is payable one week before the start of the course.

Payment Method *(please tick/cross which):*

Full Cost + cost of recorded materials <i>(except for online downloads which are included FOC)</i>	
Deposit	
Balance + cost of recorded materials <i>(except for online downloads which are FOC)</i>	

Bank Transfer	
Cheque	

BANK TRANSFERS

Our details for Bank Transfers as follows:

Account Name	D Coronelli
Sort Code	30-94-83
Account Number	2779456
Reference	Your Name

CHEQUE PAYMENTS

Please make cheques payable to: DANIELA CORONELLI

and send to the following address:

D CORONELLI, c/o 13 Blacklers, Park Road,

Dartington Hall, Totnes, Devon, TQ9 6EQ

(Note: if you are paying by cheque, please send your cheque with this form)

Keeping in Touch

How did you hear about the 'Mindfulness4Wellness' Courses?

(Please tick / cross next to which)

Friend / Family / Colleague	<input type="checkbox"/>	Website	<input type="checkbox"/>
Doctor / Hospital	<input type="checkbox"/>	Event	<input type="checkbox"/>
Support Group	<input type="checkbox"/>	Poster / Flyer / Leaflet	<input type="checkbox"/>
Magazine Article	<input type="checkbox"/>	Other	<input type="checkbox"/>
Magazine Advert	<input type="checkbox"/>		<input type="checkbox"/>

Tick the box below if you would like to receive news from 'Mindfulness4Wellness', including offers of events and courses.

We will never pass on your details to other organisations.

Newsletter Sign-Up	<input type="checkbox"/>
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After completing this **BOOKING FORM** (either manually or digitally), please either email it to **m4w.info@gmail.com** or post it to **Mindfulness4Wellness**, at the following address:
13 Blacklers, Park Road, Dartington Hall, Totnes, Devon, TQ9 6EQ
