

Registration form: Intensifying Deep Affective Processing in Psychotherapy, An Experiential Extended Workshop for Therapists Presented by Susan Warren Warshow, LCSW

August 13th, Sept. 10th, Oct. 15th and Nov 12, and January 14, 2012

Name: \_\_\_\_\_ License No. \_\_\_\_\_

Professional Title (e.g. M.D., Ph.D., LCSW, MFT, etc.) Address:

City, State, and Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

I certify that I am either a certified or registered health professional. I agree that I will respect the privacy of the patient material, and will treat it in a confidential manner in keeping with my professional code of conduct. I agree to not record any of the patient material. I would/would not like to continue receiving email announcements from Susan Warren Warshow LCSW

Signature

\_\_\_\_\_

The fee for the workshop is \$1000.00 (refundable in full through July 23, 2011). 20 continuing education credits for LCSWs, and MFTs, included. (PhD's not yet determined). Buffet lunch is included in the fee.

Please make checks payable to Susan Warshow LCSW and mail check and registration form to: Susan Warren Warshow, LCSW 21241 Ventura Blvd., Suite 251 Woodland Hills, California 91364

Registration form can be faxed to (818) 704-1986.