

Registration Form

Name

Address

Postcode

Phone (ah) Phone (bus)

Mobile Email

I found Openground through:

Referral GP/Other
 Press Advertising (please specify)
 Other (please specify)

Course Commencement Date

Due to my current financial circumstances I would like to discuss an alternative payment option.

Yes No

In applying to register for the Openground Mindfulness Training, I hereby absolve and indemnify Openground and all their servants, agents, employees from all liability arising from injury or damage in connection with my participation in programmes provided by or in connection with Openground.

I have enclosed a cheque/money order for

Signed Date

Office Use Only:

Fees:	Agreed fee:	<input style="width: 140px; height: 20px;" type="text"/> \$		
Amount: <input style="width: 120px; height: 20px;" type="text"/> \$	Date Received: <input style="width: 120px; height: 20px;" type="text"/>	Receipt No.: <input style="width: 120px; height: 20px;" type="text"/>	Receipt Date: <input style="width: 120px; height: 20px;" type="text"/>	
Amount: <input style="width: 120px; height: 20px;" type="text"/> \$	Date Received: <input style="width: 120px; height: 20px;" type="text"/>	Receipt No.: <input style="width: 120px; height: 20px;" type="text"/>	Receipt Date: <input style="width: 120px; height: 20px;" type="text"/>	

Notes

Confidentiality

All written and verbal information which you share with any of the instructors will be regarded as confidential and treated with respect.