





APPLICATION FORM FOR SHORT COURSES

I would be interested in attending: (Please tick box)
Introduction to Mindfulness
Living with Psychosis
Introduction to Recovery
Managing your Pain
Your Rights
Managing Anxiety
Stepping stones to wellness
Living with Bipolar Illness
Introduction to Wellness Recovery Action Plan (WRAP)
Sharing Skills to promote learning for health
Name:
Address:
Telephone number (optional):
Email Address:

Hope • Control • Opportunity