**Kirsteen Greenholm**

**Psychotherapist, supervisor, trainer**

**The Studio**

**136 Causewayside**

**Edinburgh EH9 1PR**

**Application Form**

**Creative Relating: CPD group with Kirsteen Greenholm**

*Thank you for your interest in this group. Please complete the following information and return to* [*kirsteen.greenholm@icloud.com*](mailto:kirsteen.greenholm@icloud.com)*. I will contact you on receipt. If your application is successful, your place will be reserved on receipt of £100 deposit. This will be deducted from the cost of your first year in the group.*

**1. Basic details**

Date of application:

Name:

Date of Birth:

Address:

Contact phone number:

Contact email address:

**2. Gestalt training**

Please provide the dates and training centre where you completed your core gestalt training, and any other training information you feel is relevant.

**3. Please briefly describe the reason for your interest in joining this group and the context of your client work.**

**4. Please describe any health issues which may be relevant to you participating in the group.**

**5. In applying for this group, you are agreeing :**

* to a mixture of group process, experiential work, skills practice and theory.
* to pay the annual fee (4 modules, £800.00) for each year you begin in the group. The fee will not be waived for sessions you are unable to attend.
* The annual fee can either be paid in full before the start of each year, or by a first instalment of £100.00, and subsequent payments of £200.00 at each weekend module.

*Thank you for your application. I will respond to you as soon as possible*

Kirsteen Greenholm

BA (Hons). Dip. GPTI. UKCP reg. GPTI TSM.