

**EMDR Therapy Basic Training with  
Kathy Karn M.Ed. & Brynah Schneider Ph.D., C.Psych.  
Registration Form**

Name and Degree (as you want it on your certificate): \_\_\_\_\_

Street Address: \_\_\_\_\_

City, Province: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_

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

Phone (day) \_\_\_\_\_ (evening): \_\_\_\_\_

Highest Degree: \_\_\_\_\_ Field of Study: \_\_\_\_\_

Professional Registration: (e.g. RSW, C.Psych, etc.) \_\_\_\_\_

Licensing Body & Registration Number: \_\_\_\_\_

Employer & Accreditation Body \_\_\_\_\_

How did you learn about this course?  
\_\_\_\_\_

**Fee:** Part 1 & Part 2, including 10 hours mandatory consultation, \$2300 + \$299 HST when paid-in-full 21 days prior to event or \$2400 + \$312 HST after the Early Registration Deadline. Please make cheque/money order/email transfer payable to: Dr. Brynah Schneider 389 Hyde Park Rd. Suite 1, London ON N6H 3R8

Visa - Card Number: \_\_\_\_\_

Expiration (MM/YY) \_\_\_\_\_ Security Number (3 digits on the back of card): \_\_\_\_\_

Name of Card Holder: \_\_\_\_\_

**Mail or fax 519-657-9984 completed Course Registration Form plus payment to: Dr. Brynah Schneider 389 Hyde Park Rd. Suite 1, London ON N6H 3R8**

**Cancellation Policy:** There is a \$200 cancellation fee up to 21 days prior to the course. After that time the balance of your fee can be transferred to an alternate EMDR Therapy Basic Training course pending availability. Trainees who interrupt their training due to circumstances beyond their control must complete the training within a 2 year frame.

Payment Plan available upon request.

For more information, please contact: Brynah Schneider: 519-679-1952 email: brynahschneider@me.com 389 Hyde Park Rd. Suite 1, London ON N6H 3R8 or

Kathy Karn: 519-673-7703 email:kathykarn@me.com 389 Hyde Park Rd. Suite 1, London ON N6H 3R8