## York University Psychology Clinic

Registration Form – Please Print Clearly

## **Mindfulness Meditation**

Fee: \$ 175.00 for 10 weeks (\$ 50.00 for students with valid ID) (for participants with extended health coverage for psychological services, the fee should be reimbursable).

**Starting Wednesday October 10, 2018** (Oct 10, 17, 24, 31, Nov 7, 14, 21, 28, Dec. 5, 12,). **Time: Wednesdays 12:00 – 1:00 PM, Location: YUPC 102 BSB** 

Name:			
Organization:			
Address:			
			Number:
Email:	Day	y Phone:	
by cheque or credit card (V Confidential fax (416-650-8	isa or Mastercard 8489) accepted w	and must accompa- ith credit card payme	to start of workshop. Payment must be made ny the registration form. Registration by ent only. Cheques should be payable to York w.yupc.org) under Continuing Education.
I wish to pay by:	Cheque	Visa	Mastercard
Total fee enclosed: \$			
Card Number:			<del></del>
Expiry Date:			
Name on Card:			
Signature:			

NOTE: You will receive an email confirmation of your registration within 2 business days of its receipt. If you do not receive this email, please contact the clinic to ensure that we have received your

Please be sure to provide email address & phone number so we can contact you in case of last minute changes.

registration.

