



HAWAII CENTER  
for PSYCHOLOGY

Working with Emotion in Psychotherapy: Emotion-Focused Therapy  
A Process-Experiential Approach

Presented by Leslie Greenberg, Ph.D.

Saturday & Sunday, July 27 & 28, 2013  
Ward Warehouse – Conference Room (2<sup>nd</sup> floor)  
1050 Ala Moana Boulevard, Honolulu, HI 96814

For more information go to [www.hawaiiicenterforpsychology.com](http://www.hawaiiicenterforpsychology.com)  
Select “FAQ” tab and select “Clinical Training Workshop”

\*You must complete this form and make the required payment to be registered.

**WORKSHOP REGISTRATION FORM**

Name \_\_\_\_\_ Phone (preferred) \_\_\_\_\_  
Degree \_\_\_\_\_ Phone (alternate) \_\_\_\_\_  
Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
Email \_\_\_\_\_

Please check here and specify if you have any special needs during the workshop

**REGISTRATION FEES**

**\*Note\* You must attend the Workshop on the Saturday, July 27th to attend the Experiential Workshop on Sunday, July 28th. There are only 16 seats available for the Sunday, July 28 Experiential Workshop. ALL seats will be filled on a first-come first-serve basis.**

**Early Registration (by Friday, June 28, 2013)**

- Saturday, July 27 Workshop (\$207.32 tax included) \$ \_\_\_\_\_
- ~~Sunday, July 28 Experiential Workshop~~ — **SECTION HAS BEEN FILLED** \$   X    
((\$207.32 tax included))

**General Registration (after Friday, June 28, 2013)**

- Saturday, July 27 Workshop (\$235.60 tax included) \$ \_\_\_\_\_
- ~~Sunday, July 28 Experiential Workshop~~ — **SECTION HAS BEEN FILLED** \$   X    
((\$235.60 tax included))

**APA, HPA, CPA, NASW, HAMFT, HMA, APNA Members**

*Please circle applicable membership*

- Saturday, July 27 Workshop (\$186.39 tax included) \$ \_\_\_\_\_
- ~~Sunday, July 28 Experiential Workshop~~ — **SECTION HAS BEEN FILLED** \$   X    
((\$186.39 tax included))

**Student Registration**

**\*Due to limited space, there are only 15 slots available for students on July 27th.**

- Saturday, July 27 Workshop (\$144.50 tax included) \$ \_\_\_\_\_
- ~~Sunday, July 28 Experiential Workshop~~ — **SECTION HAS BEEN FILLED** \$   X    
((\$144.50 tax included))

**TOTAL \$ \_\_\_\_\_**

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**Payment Methods**

Credit Card (Mastercard, Visa, American Express, Discover)

Card Number \_\_\_\_\_ Exp Date \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_ Security Code (3-digit) \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Cancellation Policy**

Cancellation requests must be made by phone call to the Hawaii Center for Psychology fourteen (14) days prior to the event in order to receive a full refund—(808)538-7793. No refunds thereafter except in cases of personal or family illness.

Office use only: Date Received _____ Check # _____ Authorization initials _____
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**To Register:** Fax or e-mail this completed registration form to:  
Fax: (808)538-7799  
Email: request.hcp@gmail.com  
Phone: (808)538-7793