

We are pleased to offer this series of weekend trainings in the uses of hypnotherapy for mental health professionals. We offer this training only once in the Fall and once in the Spring. Over the years, we have found hypnotherapy to be a very useful technique in working with anxiety, stress, anger management and PTSD. We hope you will join us for this training series. We have also included the registration form as a PDF attachment to this email.



## ADVANCED EMPATHY: Utilizing Hypnosis in Counseling & Psychotherapy

**Initial Weekend of Training - February 25 & 26, 2012 – 9-5 pm**  
**Second Weekend Of Training - March 3 & 4, 2012 – 9-5 pm \***  
**Final Weekend of Training- March 10 & 11, 2012 – 9-5 pm \***  
 (\* Final two weekends may be changed according to the needs of the group)

<p>A series of weekend workshops leading to 50 hours of training in hypnotherapy and certification to practice hypnotherapy in the State of Florida in accordance with Florida Statutes.</p> <p>50 hours of CEU's available for professionals licensed under F.S. Chp. 491, Rule 64B4-7.002 F.A.C. BAP #85</p> <p><b>Facilitators:</b>  <b>Robert M. Bollet, Ed.D., Lic. Psychologist</b>  <b>James R. Rini, Ed.D., LMHC, LMFT</b></p>	<p style="text-align: center;"> <b>Fee for professionals: \$375</b>  <b>Group of three or more: \$350 each</b>  <b>Graduate students: \$275</b>  <b>Group of three or more: \$250 each</b> </p> <p style="text-align: center;"> <small>(Advanced registration required - deadline February 15, 2012          No Walk-ins          Less \$25 per total if paid before February 1, 2012.          If unable to attend, refund guaranteed - 5%.)</small> </p> <div style="text-align: right;"> </div>
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**For more registration information contact Dr. Robert Bollet, Lic. Psychologist**  
**Space is limited. Those interested should phone: 407-678-6655 ext. 3**

Training will be conducted at the Center for Counseling & Consulting  
 661 Seminola Blvd., Casselberry, FL 32707

### REGISTRATION FORM - Deadline, February 15, 2012

(Please remove and mail with payment)

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Degree: \_\_\_\_\_ Lic. #: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_ email: \_\_\_\_\_

I plan to attend the 50 hours of training in hypnotherapy being offered by the Center for Counseling & Consulting staff. My payment of \$ \_\_\_\_\_ is enclosed. Make check payable to CCC and mail to CCC, 661 Seminola Blvd., Casselberry, FL 32707. You will be mailed/emailed a confirmation.

\_\_\_\_ Check Number: \_\_\_\_\_ If you would prefer to charge the training on your credit card, please include the number.

\_\_\_\_ VISA Credit Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Code: \_\_\_\_\_

\_\_\_\_ MasterCard Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Code: \_\_\_\_\_

Signature as appears on credit card: \_\_\_\_\_