



Please complete all required information, and mail with an appropriate check to Diane Spindler, 32 Glenwood Rd, Rutland, MA. 01543.

Registration Form

Name _____

Address _____

Email _____

Phone _____

License type _____

License # _____

How did you learn about workshop? _____

Date and place of workshop _____

Amount of check _____

CEUs are available for Social Workers and LMHCs ONLY