

Frederick P. Horan, Ph.D.
Walpole Behavioral Healthcare LLC.

841 Main Street Walpole, MA 02081

Phone 508.660.6699 Fax 508.660.6658

Relaxation/Stress Reduction Training Workshop
Intake Form

Prior to signing up for the workshop, please visit our website at www.walpolebh.net for information and the schedule for the next class. In addition, it is helpful for us to have a brief phone discussion so that I can answer any questions you might have and to make sure this workshop will be right for you. On the form below please put in general times that are best to reach you and I'll do my best to contact you then, or feel free to call me directly at 508-660-6699 ext. 217 and leave a message.

The cost of the program is \$100 for four group sessions payable by check, made out to me. If a class falls on a holiday, we just move it out a week. If you miss a session, you are welcome to attend a make-up session in a subsequent training at no additional charge, subject to space availability. For anyone who has already taken this training and wants to come in for additional meditation practice, the charge is \$25 per session, again subject to space availability.

Please fill out the information on the form below, print it out and send it in with your payment. Please do not send cash.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____
(Please circle the phone number you prefer to be contacted on).

Best time to reach you? _____

Date of desired workshop (see website for date of upcoming trainings.): _____

Signature: _____ Date: _____

Please fill in this form, print it out and mail it with your check made out to me to:

Frederick P. Horan, Ph.D.
Walpole Behavioral Healthcare
841 Main Street LL2
Walpole, MA 02081

If the time of the workshop doesn't work for you, is there a day and time that would be preferable? Write it in below and we will try to put a group together at different times if there is sufficient interest. Please don't send in a check for the enrollment until we have spoken to ensure there is a space available at your preferred time.

Day of week (Monday through Thursday) you would prefer _____

Time of day (7AM-7PM) _____

Please Note: This training is not intended as a primary treatment for a serious anxiety disorder, rather it is to help you learn ways to significantly reduce stress and enhance your overall mood and day to day functioning. If you feel you need treatment for a possible anxiety problem and would like to make an appointment for an individual therapy appointment, please call our office at the number above and dial extension 230 which is our intake line, leave a message and someone will get back to you shortly.