



**Healing Circles Advanced Cancer Support Training Program  
Application and Registration Form**

Name \_\_\_\_\_ Date \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Work or cell:(\_\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

How did you hear about this training program? \_\_\_\_\_

Date of retreat you are applying for \_\_\_\_\_

What are your professional certifications, if any? (Yoga teacher/RYT, MD, RN, PT, LCSW, etc.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you are certified in Yoga, what/where is the extent of your training and/or certification? \_\_\_\_\_

Please tell us a little about your involvement and interest in any healing modalities (yoga, body work, psychology/psychotherapy, expressive movement, the arts, creative writing, etc.). How would this training complement your healing interests?  
\_\_\_\_\_  
\_\_\_\_\_

What do you hope to gain from the training program? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



How do you hope to apply the skills learned in this training to your teaching? \_\_\_\_\_  
\_\_\_\_\_

Are there resources that you know of in your area you can connect with (cancer resource centers, healthcare centers, etc.) to collaborate with and/or help you to greater serve those with cancer/illness? \_\_\_\_\_  
\_\_\_\_\_

Do you have any dietary concerns, allergies or food restrictions? \_\_\_\_\_  
\_\_\_\_\_

Do you have any other questions about the program? \_\_\_\_\_  
\_\_\_\_\_

**Payment:**

To complete your registration, please return this form by **March 7<sup>th</sup>**, by mail, fax or scan along with your *non-refundable* deposit of \$1,000 to reserve your space. The balance of \$875 must be received before the start of the program unless alternative arrangements have been made. You may pay online via paypal or credit card, or mail a check (payable to Healing Yoga Foundation) to the address below:

Healing Yoga Foundation, c/o Commonweal  
PO Box 316  
Bolinas, CA 94924  
415-931-9642  
kate@healingyoga.org  
www.healingyoga.org **or** www.commonweal.org/program/hyf/

We are here to be helpful. Please contact us if you have any further questions regarding this program or if there is any more information we can provide.

With Best regards,  
Kate Holcombe and the Healing Yoga Foundation and Commonweal Staff