**ETI Manual Registration**

Name:                                              

Email:

Address:                                              

     

Phone number:                                         

Profession:

Special Needs, if any:

Name as you desire it stated in certificate of attendance/completion:

**\_\_ Experiential Psychoeducation – Trauma and the Brain -   
December 3, 2017**

**\_\_ Attachment/Complex/Developmental Trauma and Attunement -   
January 7, 2018**

**\_\_ Emotional Regulation and Experiential Grounding -   
February 4, 2018**

**\_\_ Individualized Sustainability Plan – Self-Care Continuum -   
March 11, 2018**

**\_\_ The Resilience Continuum, and Post-Traumatic Growth -  
April 1, 2018**

**\_\_ Psychological First Aid and Crisis Response -   
May 6, 2018**

Please send an email with this info to [center@eti.training](mailto:center@eti.training) and we will send you a payment request to complete your registration.