

**MINDFUL SELF-COMPASSION 8 -week 9 session programme (all formats including  
5-weekend programme)  
Background Information (strictly confidential)**

**Course facilitator Annette Boden MSc**

*Please note:* This information will only be read by the course facilitator. If you feel uncomfortable answering any questions, please note that on the form and we can have a private conversation before the program begins. Leaving a question blank will have no impact on inclusion in the program. Thank you.

**Name:**

**Address:**

**Current Email address:**

**Would you like to be included on a regular mailing list /receive my newsletter to receive information about future courses and events? Please tick Yes ...../ No....**

**Phone:** (home) (mobile)

**Gender:** female male

**Date of Birth:**

**Partnership status:** Single Married Divorced Partnered Other

**Occupation:**

**Why are you interested in participating in this program?** (Please be advised that this course is designed for personal growth and development not therapeutic gain.)

**Do you have a regular practice of meditation? If so, what type and how many years have you been practicing?** (It's not necessary to have any experience of meditation prior to this program.)

**How would you describe your physical health:** excellent good fair poor

**Are you currently in psychotherapy?**

**Are you currently taking psychoactive medication, or any medication that may affect how you feel from one week to the next?** (If so, please provide details.)

**Is there anything else that would be helpful for the facilitator to know at this time?**

NB: This course is not a replacement for psychological therapies. It does not provide psychological intervention as such.

If you have recently received or are currently receiving treatment from a psychiatrist, psychotherapist or counsellor for an ongoing mental health problem, it is strongly advised that you obtain approval from your mental health professional before attending, and is something we can discuss before you decide to attend the course to ensure this is the right course for you at this time.

Also, if you have recently or are currently going through a traumatic life event, such as a recent bereavement this may not be the right time for you to attend the programme. This very much depends on your current psychological health and the support networks that you have around you, such as friends, family and mental health professionals.

*I understand the above and that my participation in this program is entirely voluntary and I am free to withdraw at any time without penalty or prejudice, except for the non-refundable course fee. At the present time, however, I am planning to participate in the entire course (including the retreat), and to practice mindful self-compassion at least 30 min/day (formally or informally).*

**Name:**

**Date:**

**Send completed form to:**

Email: [annette@annetteboden.co.uk](mailto:annette@annetteboden.co.uk)

Or Post to : Room 5, The Knutsford Town House Business Centre, 98 King Street, Knutsford, Cheshire, WA16 6HQ

Telephone: 07753 957371 for further information/ to discuss any questions not completed here.

