

Advanced Laughter Institute

Telecourse Registration and Confidential Application

(Please fill this out after you have contacted us for class time & cost information)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Country: _____

Phone: _____ FAX: _____ Email: _____

Method of Payment: check (make payable to Advanced Laughter Institute)

Enclosed for: _____

Charge my: Visa Mastercard

Credit Card #: _____ Exp. Date: _____ Amount: _____

Name as it appears on card _____

Signature _____

Billing Address for card if different than above:

Address _____ State _____ Zip _____

A Confirmation Letter confirming your enrollment, certification information, and directions for the course will be mailed after your registration is received.

Easy Registration

Mail your registration form to:

635 N. Alisos St.

Santa Barbara, CA 93103

If paying by credit card, you may:

FAX your registration to (805) 966-6146

or call (805) 966-0025

Questions? Please call (805) 966-0025 or email: teehee@teehee.com

Continuing Education Credit: MFTs, LCSWs and NURSES: This course meets the qualifications for continuing education credit for MFTs, LCSWs, and NURSES as required by the California Board of Behavioral Sciences (Provider # PCE763), and for Nurses (Provider # CEP4764).

Note: Full attendance is required in order to receive contact hours available. Late arrivals and early departures prevent the awarding of continuing education credit.

Refunds, Changes, and Cancellations: There is a \$35.00 processing fee, per course, for refunds or change requests (must be in writing) received at least seven days before the course. After that date, there will be no refunds, however changes may be processed, if space is available and if the \$35.00 processing fee is paid, up to 48 hours before the originally scheduled event. No additional refunds or changes are allowed. If a course must be cancelled due to an unforeseen event (such as natural disaster, crisis or instructor illness), the seminar will be rescheduled. Participants will be able to take another course of the same fee. No refunds will be made.

The Institute of Advanced Laughter reserves the right to refuse service.

Confidential Application

Please feel free to use the back of this paper if necessary

1. My laughter purpose (vision), at least for the next few years of my life is:

2. What do you like about your laughter? What do you dislike?

3. How was laughter regarded & treated in your family?

4. What was your most memorable positive laughter experience? What was your most negative laughter experience?

5. Do you have any physical conditions which might effect your laughter?

6. Are you on any medication? If so, what, how much, and how often do you take it?

7. Have you been in therapy or are you now?

8. If this application seems a bit serious, go ahead and laugh.