

Accelerated Experiential Dynamic Psychotherapy

Advanced Seminar (2025-26)

Registration Form 報名表

稱謂 Title	<input type="checkbox"/> 女士 Ms.	<input type="checkbox"/> 小姐 Miss	<input type="checkbox"/> 先生 Mr.
姓名 Name	(英文 Eng.)		(中文 Chinese)
機構 Organization			
職位 Position			
地址 Address			
聯絡電話 Tel. No.	(手提 Mobile)		(辦公室 Office)
電郵 E-mail			
收費 Fee	<input type="checkbox"/> 5,600 (regular) <input type="checkbox"/> \$5,200 (before : 15/10/2025) <input type="checkbox"/> \$3,900 (For AEDP facilitators and helpers before : 15/10/2025)		

(每位參加者填寫一份報名表及填寫所有項目。如有需要，請自行影印。 Complete one form for each applicant and fill in all items .Photocopy if necessary.)

報名方法及細則 Enrollment Methods and Conditions :

Please made a crossed cheque payable to (**支票抬頭**) : “ **The Mental Health Association of Hong Kong** ”

Cheque No.: _____ of Bank: _____

Please pay in cash to our account no. 280-396144-023 with Hang Seng Bank, and then, send the pay-in slip with this form to us. 請把現金存入我們在恒生銀行帳號：280-396144-023，戶口名稱：The Mental Health Association of Hong Kong，然後把銀行入數紙及此表格郵寄給我們。

Please post completed registration form and crossed cheque / pay-in slip to : (郵寄地址)

T. N. Foo Centre for Positive Mental Health, Office F, 9/F., Harvest Moon House, 337-339 Nathan Road, Kowloon

General Information

- Application will only be secured with payment. Fees are non-refundable.
- Successful applicants will be confirmed by email in mid October.
- Receipt of application fee will be presented to trainees in the workshop.
- A “Certificate of Attendance” will be presented to trainees after the workshop (at least 80% attendance rate).
- If black rainstorm warning or typhoon signal No. 8 is hoisted, the workshop will be cancelled. Details of postponement or other arrangements will be announced afterwards.

收集個人資料聲明

- 有關本會《收集個人資料聲明》，請參閱本會網站 <https://www.mhahk.org.hk/chi/pics.htm>。本會擬使用你的個人資料，以作日後聯絡、籌款、義工招募、宣傳活動/服務/課程或收集意見等推廣用途。未經你的同意，本會不會使用你的個人資料作上述用途。在本表格上簽署表示你同意香港心理衛生會如此使用你的個人資料。如你不同意，請在以下空格加上「✓」號。

本人不同意香港心理衛生會使用本人的個人資料作上述推廣用途。

申請人簽名 Signature of applicant : _____

日期 Date : _____