Greenshill

Kilkenny

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**Student Enrolment Form**

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| --- | --- | --- |
| **PLEASE COMPLETE USING BLOCK CAPITAL LETTERS** | | |
| **Surname:** |  | |
| **First name(s)** |  | |
| **Address:** |  | |
| **Telephone:** | **Mobile** | **Home/Work** |
| **Email:** |  | |
| **All our workshops are based around discussion with some written exercises at your own discretion.** | | |

**I would like to register for the following course/s**

|  |  |
| --- | --- |
| **Course title** | **Commencement date** |
|  |  |
|  |  |
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***All our Workshops are free however, there is an enrolment fee of €5 per semester, per student. Our workshops are also open to everyone.***

**Student Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**













*Recovery is moving on, achieving and learning, being the best and the best that I can be with confidence” Mental Health Discussion Group Clonmel 2013*

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