

Application: OASIS TRAINING – New Haven, CT
Friday, October 1, 2010, 8:30 am to 4:00 pm

Note: you may fill in this form and return it via

- email: renee@oasisintheoverwhelm.com with copy to millie@milliegrenough.com
- mail: Renee O'Connell * OASIS * 3 Old Country Road * Oxford, CT 06478

Name _____ email _____

Address _____ tel. _____
fax: _____

Profession _____ your website? _____

1. How did you know about this Training?
and/or How long have you known Millie – from where?

2. Why are you interested in becoming an OASIS TRAINER? – What attracts you to OASIS right now?

3. What special groups do you visualize yourself working with?
(e.g. parents, nurses, church groups, CEOs, teachers, children, stroke survivors, etc.)

4. What are your wildest dreams for you and OASIS?

5. Do you see yourself presenting solo? with a partner? some of each?
Explain.

6. In order for me to meet your unique needs in **OASIS Training**, please tell me: What will be most helpful to you to make you feel confident and excited about sharing the *OASIS Strategies* and *OASIS "philosophy"*?

Notes re Fee/Deposit/Refunds

- All-inclusive fee for Training (all-day training, two teleconferences, ½ day training, all materials) = \$695.

*Bring a friend, colleague or family member and receive \$50 off your registration fee.
Group discount also available*

- \$150 deposit fee due with application. Balance due one week before the All-Day Training. If you need to cancel and do so by ten days prior to the training, you will receive a refund of your deposit and/or payment, less a \$30 processing fee. If you register for an upcoming *OASIS Training*, your \$30 processing fee may be applied towards that training.

Early Bird Discount Ends September 5th – Receive \$100 Off

All-Day Training
Friday, October 1, 2010, 8:30 - 4:00 EDT
followed by 2 Teleconferences
+ ½ day Training

___ Yes, I want to apply for the **OASIS Training** being offered.

___ I cannot be part of this Training Group, but am interested in the next Training.

___ Enclosed is my check for _____ made out to OASIS.

___ I prefer to pay by credit card or cash. Please contact me.

Name (printed) _____

Signed _____

Date _____