

Compassion, Clarity & Connection – a 4 week virtual class
Offered by Jean Leonard, Ph.D., LLC
PARTICIPANT INFORMATION FORM

4. 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.)
5. Please describe the current state of your physical health:
 Poor Average Good Excellent
6. Please describe any health or medical condition that you feel may impact your experience in the class.
7. Do you have any questions or concerns about the class?
8. Is there anything else that would be helpful for me to know at this time?

Registration Process:

Investment: \$200

- This is a suggested payment. If you cannot afford this suggested rate, pay what you can. If you can pay more, I welcome your generosity, as it will help support me, and those who are struggling at this time.
- Payment can be made via Paypal or Zelle: send money to jeanleonardphd@gmail.com. Thank you.
- Your space in the class is not reserved until I receive both your application (Participant Information Form and Informed Consent Form) and payment. Refunds are not available once the class has begun.
- **Complete the Participant Information Form & Informed Consent (one document) and e-mail it to jeanleonardphd@gmail.com**

I have read and understand these terms of registration.

Signature

Date