

**APPLICATION
FOR
BRAIN SYNCHRONIZATION THERAPY BST TRAINING**

Brain Synchronization Therapy (BST) is based on South American Toltec shamanic traditions and Andine energy practices. Participants may find it to be similar to components of Neurolinguistic Programming (NLP), Eye Movement Integration Therapy (EMI), Eye Movement Desensitization and Reprocessing (EMDR), and Brainspotting. BST is designed to be a safe and gradual way of processing trauma to minimize the possibility of the client becoming overwhelmed by the process of resolving past traumas.

The purpose of the training is to offer an opportunity for participants to become competent in the provision of BST. Training will include hands-on learning and practical application to prepare participants to use BST on themselves and select others. BST is a protocol for trauma therapy that can be delivered by a licensed professional or by an unlicensed paraprofessional. The only prerequisite for training is an openness to energy psychology and a desire to help people heal from trauma. People who may find this training beneficial include registered nurses, physicians, psychologists, social workers, marriage and family therapists, licensed addiction counselors, certified addiction counselors, licensed professional counselors, unit staff, etc.

The training will be held at **Health Solutions, 1 Wellness Way, Pueblo Colorado 81006**. The book Innovative Practices from the East and West for Bodymind Health by Dr. John Hartung must also be purchased for \$40. The cost is \$250 for students and \$350 for everyone else and includes the cost of the book and manual.

The three-day training will be held Sept 30th, Oct 1st, will offer follow up training and consultation after participants have had the opportunity to utilize BST. To receive a certificate, participants must attend all three days.

Applications may be submitted to frontdesk@anewleaftherapy.org. The training space will be limited so please get your application in as soon as possible. Payment must be received to hold your spot.

By signing below, you acknowledge your interest and intent to attend this BST Training.

Name (print):

phone:

Current Title:

ail:

Employer:

REASON FOR INTEREST IN TRAINING: Please attach a short summary of why you want to participate in the BST training and how you plan to use the protocol.

By signing below, I am committing to the completion of 24 hours of training to receive the certificate of training for the BST protocol. I also understand and agree that If I cancel within 2 weeks of the training, I will not get a refund.

Applicant's Signature: _____

Date:

Email/Scan Applications to: Hello@anewleaftherapy.org. Checks should be made out and mailed to A New Leaf Therapy at 327 Colorado Avenue Pueblo, CO 81004. If you have any questions, you can call 719-948-7120 or email Hello@anewleaftherapy.org.