
The Therapeutic Training Company

The ME Recovery System application

Before completing the application form below please take a few moments to consider the following.

The ME Recovery System is a therapeutic training programme, not a treatment, and success and lasting recovery depend upon the commitment, application and motivation of the client. Ask yourself whether you are ready to change your thinking, the way you use your mind, and perhaps your beliefs. These are what have kept you stuck in the past and changing them is key to changing your health (and your life).

If you would like to discuss any aspect of your current suitability for the course then please do contact us by email [Contact](#) or telephone 0845 868 1288.

If you feel you can fully commit to the training then please complete the form below.

All information will be treated as confidential. Please fill in all sections.

1. Contact details.

Name:

Name you wish to be called by:

Address:

Post code:

Please indicate, if you can, the best times for us to call to assess your application:

Tel day, number:

best times:

Tel evening, number

best times:

Email:

2. Personal details

Sex: M / F

Date of Birth:

Doctor's name and address

You occupation, current or previous

Your current family situation (married/partnered, single, children, siblings etc):

3. Your condition

How would describe your present condition, issue or illness?

When did it start?

How did it start?

If you have a medical diagnosis, what is it? Please include **all** physical and psychological diagnoses

Are you currently receiving any medical or psychological treatment? Please give details.

Please list any medication you are taking.

Have you received any treatment for your condition, illness or issues in the past?
Please give details.

Please indicate your current condition by choosing **one** number only:

On a scale of 0 - 6 how much is **fatigue** a feature of your condition?
(Please circle. 0 = not at all and 6 = a great deal)

0 1 2 3 4 5 6

On a scale of 0 - 6 how much is **brain fog** a feature of your condition?
(Please circle. 0 = not at all and 6 = a great deal)

0 1 2 3 4 5 6

On a scale of 0 - 6, how much is **pain** a feature of your condition?
Please circle. (0 = not at all and 6 = a great deal)

0 1 2 3 4 5 6

On a scale of 0 - 6, how much is **anxiety** a feature of your condition?
(Please circle. 0 = not at all and 6 = a great deal)

0 1 2 3 4 5 6

On a scale of 0 -6, how much is **depression** a feature of your condition?
(Please circle. 0 = not at all and 6 = a great deal)

0 1 2 3 4 5 6

Do you know someone personally who has used the training programme to recover their health, and if so what is the most important thing that you have learnt from them?

Do you understand that your mind, your body and your emotions can all influence each other in both positive and negative ways?

What do you hope to get from doing the course?

Do you need wheelchair access to the training venue?

Can you climb stairs?

Is English your first language?

4. Your future.

It is important when taking steps to change your health and your life that you have a **Personal Vision** for your future. How do you see your new Great Life?

Please give a picture of your plans, projects, schemes and ideas for your future, whether they may be small or large, short term or longer term.

My future:

5. Self-assessment of suitability.

Do you believe that you can get completely well?

Do you believe that you deserve to be well?

Are you open to new ways of thinking and being?

Is now the right time to be well?

Are you committed to doing the work required to get well?

What you feel is needed from you during the training?

Knowing yourself better than anyone else does, in what ways could you undermine, spoil, or waste this opportunity to get well – and what will you do to ensure that does not happen?.

6. Training Agreement.

You should only sign this application form if you agree to the following:

I understand that The ME Recovery System is a training programme and that it does not guarantee me any results because I alone am responsible for applying what I learn. I am committed to doing the work necessary to get myself well.

7. Payment details.

The fee for The ME Recovery System for private clients is £585 in the UK, £685 in NI and in CI, and includes:

- pre-course telephone assessment
- all materials
- training over three consecutive days in a small group.
- individual one hour training after one week (in person or by telephone)
- individual telephone follow-up consultation after approximately one month
- further support for the following six months if required.

Please send the payment by cheque (made payable to Vanessa Cecil) with this form. It will not be cashed until 3 days before the course. If on receiving the form or during the telephone assessment it is decided that the training is not suitable for you at the moment we shall, of course, return your cheque.

Conditions of payment:

In the event of cancellation on your part fees can only be refunded, less an administration fee of £50, if it is possible to fill your place before the course starts. Should you not complete the course no refund will be possible. We reserve the right to terminate your training if we feel your continued participation would be unhealthy or unhelpful for you or another member of the training group and fees will not be refunded in these circumstances.

Ownership:

All documents you receive as part of your training constitute intellectual property and are not to be reproduced, sold or distributed in anyway.

If you agree to all of the above conditions in this document then please sign below:

Signature

Date

8. Please ensure that this is completed if you are under 18

If you are under 18 years of age please ask your parent or guardian to read through the form and to complete the following:

What do you think is required of the trainee to benefit fully from the training?

What do you think is required of you to help the trainee to benefit fully from the training?

The ME Recovery System is not a treatment but a therapeutic training programme. What do you understand to be the difference between the two?

Would you like to attend the course with the trainee as learning facilitator?

I have read and agree to the terms and conditions.

Name.....

Signature.....

Relationship to applicant.....

Date.....

Thank you for completing this form. Please send it with a cheque to:

**The Therapeutic Training Company
Innovation Centre
University of Exeter
Rennes Drive
Exeter EX4 4RN**

On receipt of your form we will contact you, normally within two weeks, to arrange a telephone assessment. If it is decided that you are suitable to do the training at this time then a date will be arranged. If not then we will, together, discuss the best way forward for you.

0845 868 1288

info@therapeutictrainingcompany.co.uk