

Grof Transpersonal Training

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Hello and welcome,

This letter contains information and registration forms for the two GTT Holotropic Breathwork retreats in Joshua Tree, California, coming up in February 2018. The six-day module format is a wonderful opportunity to deepen your process of self-exploration, and to directly experience the healing potential of non-ordinary states using Holotropic Breathwork. You will meet like-minded people from around the world, and explore together in a safe and supportive environment. You will also learn tools and techniques for living a more creative and fulfilling life, and will have extensive personal contact with some of the best Holotropic facilitators in the country. Each six-day module includes four Holotropic Breathwork sessions - participants will experience two sessions as a 'breather' and two sessions as a 'sitter'.

In addition to experiencing Holotropic Breathwork, both topics explored in these two modules are especially relevant for anyone working with others in non-ordinary states of any sort for transformation and personal healing.

These modules are open events and suitable for both participants interested in the training program and for those interested in the adventure of self discovery for personal growth.

If you are already a certified HB practitioner, your fee is reduced by \$150. Either of these modules may be used to meet the certified HB practitioner requirement for Continuing Professional Development.

The desert in February is warm, the facility welcoming and interesting, and our caterer, Rosa, provides truly delicious food. Those new to Holotropic Breathwork are always welcome!

WHAT AND WHEN:

SPIRITUAL EMERGENCY: EMBRACING UNEXPECTED TRANSFORMATION *Tuesday*, January 30 to *Sunday*, February 4, 2018. * First two days led by **Tav Sparks**, followed by four days with **Diane Haug** and GTT staff.

Understanding spiritual emergency is one of the major contributions of the holotropic perspective. Whether you are a professional or a layperson, someone interested in working with or supporting people in transformational crises, or primarily in your own growth, the module offers a rich experience and valuable information. In addition to differentiating between psychosis and spiritual emergency, we'll also explore the intensely practical aspects of who, in these kinds of crises, can benefit from Holotropic Breathwork and how best to work with them in their emergencies. This workshop includes a discussion of the concept of spiritual emergency, its manifestations and forms, historical and anthropological perspectives, treatment strategies and work with family and friends.

THE PSYCHEDELIC EXPERIENCE – PROMISES AND PITFALLS *Tuesday*, February 6, to *Sunday*, February 11, 2018 led by **Diane Haug** with special guest **Charles Grob** (half day) and GTT staff.

A new generation of psychedelic researchers and therapists, many informed by the pioneering research of Stanislav Grof, MD, are again examining the enhanced wellness, healing, creativity, and spirituality inherent in the psychedelic experience. During this retreat we will explore topics including the time-honored, cross-cultural use of psychoactive substances; the early pioneers of psychedelic therapy; the healing potential, as well of perils, in working with strong psychoactive catalysts; harm reduction; guidance for supporting others in a substance-related crisis; and government supported research projects worldwide. The topic of psychedelics will be entirely theoretical. However, this will be an excellent opportunity to experience non-ordinary states of consciousness through the vehicle of Holotropic Breathwork.

See bios for Tav Sparks and Diane Haug on our website, <http://www.holotropic.com/bios-gtt-staff.shtml>

Registration: Tuesday, January 30 at 9:30 am. The module will start after registration, approx. 10:30 am.
Tuesday, February 6 at 9.30 am. The module will start after registration, approx. 10.30 am.

Departure: Sunday, February 4, approx 12:30.
Sunday, February 11, approx. 12:30.

DAILY SCHEDULE: Except for the first and last days (see directly above), this will be the approximate daily schedule:

Breakfast:	8:00 - 9:00 a.m.	Afternoon session:	2:30 p.m.
Begin:	9:00 a.m.	Dinner:	6:00 p.m.
Lunch:	12:30 - 2:00 p.m.	Evening Session	7-10:00 p.m.

WHERE:

Joshua Tree Retreat Center
59700 29 Palms Highway
Joshua Tree, California 92252

phone: 760-365-8371
fax: 760-228-0626
email: retreats@jtrcc.org

Joshua Tree Retreat Center is a secluded, peaceful meditation center located on 420 acres of pristine desert land 90 minutes from Ontario Airport, 50 minute from Palm Springs Int'l Airport and only 5 miles away from Joshua Tree National Park. The architecture is collaboration between Frank Lloyd Wright and his son, Lloyd Wright. Each room is furnished with two twin beds and a private bathroom. WiFi is available in many, but not all, parts of the center. **Please have people contact you at Joshua Tree Retreat Center, not through the GTT office.**

ACCOMMODATIONS: There are two rooming options: single and double. We hope to be able to accommodate everyone's first choice. If you want a double and have a roommate in mind, please let us know. If there are more singles requested than available, we will let you know that you will be in a double. Similarly, if an odd number of persons request doubles, the last person to register will be notified, and he or she will be asked to pay the difference.

IMPORTANT: If we cannot give you your first choice of rooming, your fee will be adjusted to match the actual rooming situation you occupy. We will also do our best to match you with a roommate who is staying the same extra nights, but if that doesn't work out, the cost will reflect the actual rooming for those nights (single or double).

COST: *Including training, room and meals* - early registration by December 19: double \$1595, single \$1835.
Registration after December 19: double \$1695, single \$1935

ADDITIONAL ACCOMMODATIONS FOR EXTRA NIGHTS: Arrangements for any additional nights' lodging before or between the modules that are not included in your training fees must be made through GTT on the registration form. **Because we will be charged for them, if you have a cancellation or no-show for extra nights after the cancellation cut-off date for the modules, we will not be able to give refunds or credit.** Rates for extra nights are as follows: *Extra nights before or between, including dinner and breakfast:* **double \$110 single \$130**

MEALS: Meals will begin on Tuesday at lunch and go through Sunday at lunch. All meals in between are included. Monday morning breakfast will be on your own unless you have a room for that night.

SPECIAL REQUESTS: Beyond asking if you are a vegetarian or dairy/gluten free, we cannot accommodate special dietary requests. Each meal will offer choices, however, if having special food is important to you, please plan to bring what you need.

TRANSPORTATION: Travel info for airport, shuttle, and driving is available on a separate sheet. Please let us know if you need one. We'll also send out a ride share email a week or two before the event.

WHAT TO BRING: Comfortable clothes, walking shoes or hiking boots, warm jacket, hat, rain gear, personal journal, sunscreen, water bottle, swimsuit, lip balm, flashlight (it is very dark in the desert). Keep in mind the desert climate – it is very dry so please bring sunscreen, a water bottle and layered clothing for cool mornings and evenings. Sorry, no pets.

IMPORTANT NOTE: Participants will not be allowed to take pillows, blankets, or mattresses from sleeping rooms into the group room. Mats and sheets (but not pillows) are provided, but you may bring your own.

REGISTRATION FEES: Your fees will include tuition, meals and lodging as indicated above. We ask that you make payment by December 19 with your registration, although late registrations will be accepted if space is available. Please make checks payable to: GROF TRANSPERSONAL TRAINING.

CANCELLATION POLICY: \$100 of your payment per each module is a non-refundable processing fee. The balance is refundable upon cancellation until January 16, 2018. There can be no refunds for any reason after that date. If you send a registration form without sending a payment, the cancellation policy still applies and you will be expected to pay any amounts due.

SUBSTANCE USE POLICY: Use of any non-prescription drugs or other illegal substances is not permitted during the training, including time off between modules, or at the training site. Anyone using such drugs or substances during the training or between modules or at the training site will not be allowed to continue in the training program or to become certified in Holotropic Breathwork.

Grof Transpersonal Training registration for January & February 2018

Please return both registration and medical forms with payment by December 19, 2017 for the early registration rate.

NAME _____
ADDRESS _____
CITY _____ STATE/COUNTRY _____ ZIP _____
TELEPHONE (MOBILE) _____ (OTHER) _____
e-mail _____

ROOM PREFERENCE: (SINGLE ROOMS WILL BE OFFERED AS LONG AS AVAILABLE) DOUBLE OR SINGLE
Early bird registration cost per module (registration and payment received before 19 December 2017): \$1595 \$1835
Cost for registrations received after 19 December, 2017 \$1695 \$1935

I AM REGISTERING FOR THE TRAINING MODULE(S): FILL IN AMOUNT BELOW
____ Spiritual Emergency January 30 - February 4 _____ _____
____ Shamanism February 6-11 _____ _____

I AM ALSO REGISTERING FOR THE EXTRA NIGHTS BEFORE AND DURING THE MODULES AS FOLLOWS

Price includes dinner and breakfast: Cost per night: \$110 \$130
____ Night of Monday, January 29 _____ _____
____ Night of Sunday, February 4 _____ _____
____ Night of Monday, February 5 _____ _____
____ Wire (\$15 per wire) or credit card (\$25 per module) fee _____
Total amount due _____

PAYMENT

Full payment, preferably by check, should accompany this registration, unless you have contacted us to make other arrangements. Those registering from outside the U.S. have several options. You may pay by funds transfer (instructions below), or send a check or draft made out in U.S. dollars drawn from a U.S. bank. We can also accept Visa, MasterCard, American Express and PayPal. See below.

I am enclosing payment of \$ _____ or I am sending a wire transfer for \$ _____ Please charge my Visa or MasterCard

\$ _____. (Please add \$15.00 for bank costs for each transfer, or \$25 PER MODULE for payments made by credit card.) Payment can be made by PayPal to workshops@holotropic.com - please add on any PayPal fees payable so that the amount received by GTT is as shown above. Funds transfers also sometimes incur fees that go to intermediary banks, please ask your bank about that before you send the transfer. If the amount received is too much or too little, we will settle with you at the module. **Contact us for information about work/study or payment plans.**

If paying by Visa or MasterCard, please print the 16-digit card number, expiration date, and (US only) zip code for the address on your credit card bill.

____ Exp.date: _____ Zip _____

CVC code (3 digit number on back of card) _____ Street address and zip of card billing, if different from above _____

OTHER

I will be driving from _____ flying into Ontario _____ flying into Palm Springs _____ other (specify) _____

I am a smoker ____ a non-smoker ____ a snorer ____ I would like to share a room with : _____

I am vegetarian _____ non-vegetarian _____ dairy/gluten free _____

PLEASE READ AND SIGN THE FOLLOWING. YOUR SIGNATURE IS REQUIRED FOR REGISTRATION.

CANCELLATION POLICY

\$100 of your payment per module is a non-refundable processing fee. The balance is refundable upon cancellation until **January 16**. There can be no refunds or credits for any reason after that date. If you register without sending payment, the cancellation policy still applies, and you will be expected to pay any amounts due.

SUBSTANCE USE POLICY

Use of any non-prescription drugs or other illegal substances is not permitted during the training (including days between modules) or at the training site. Anyone using such drugs or substances during the training module or at the training site will not be allowed to attend the training.

I have read and understand the above cancellation policy and substance use policy.

Signature _____

Date _____

For office use:

Date rec'd _____ Confo sent _____ Check # _____ Amount _____

Medical Form for Holotropic Breathwork Training Application

Breathwork is intended as a personal growth experience and should not be looked upon as a substitute for psychotherapy. Holotropic Breathwork can involve dramatic experiences accompanied by strong emotional and physical release. This workshop is not appropriate for pregnant women, or for persons with cardiovascular problems, severe hypertension, some diagnosed psychiatric conditions, recent surgery or fractures, acute infectious illness or epilepsy, or active spiritual emergency.

If you have any doubt about whether you should participate, it is essential that you consult your physician or therapist as well as the workshop organizers before attending.

The answers to the following questions are to assist your facilitators and will be kept strictly confidential.

Please answer all questions as completely as possible – adding further information at the end of the form where there are any ‘yes’ answers:

Do you have a past history of, have you been diagnosed with, or are you currently experiencing any of the following:	Yes	No
Cardiovascular disease, including heart attacks, any cardiovascular surgery and any cardiovascular symptoms such as angina or arrhythmia		
High blood pressure		
Strokes, TIAs, seizures, or other brain or neurological conditions		
Diagnosed psychiatric condition		
Recent surgery		
Past or recent physical injuries, including fractures or dislocations		
Present or current infectious or communicable diseases		
Glaucoma		
Retinal detachment		
Epilepsy		
Osteoporosis		
Asthma (if yes please bring your inhaler to the workshop)		
Other information:		
Are you currently pregnant?		
Have you been hospitalized in the past 20 years for significant medical issues?		
Have you ever been psychiatrically hospitalized?		
Are you currently in therapy or involved in any type of support group?		
Are you currently taking any type of medication? (if yes, please list)		
Is there anything else about your physical or emotional status we should be aware of?		

Emergency contact information:

Name _____ phone _____

If you answer "yes" to any of these questions, it is essential that you explain your answer on the back or on an attached page.

PLEASE READ AND SIGN THE FOLLOWING STATEMENT:

I hereby confirm that I have read and understood the above information, and have answered all questions completely and honestly, and have not withheld any information. My general health, as far as I am aware, is good.

Signature & please also print your name Date Age Gender

I have experienced Holotropic Breathwork before: Yes / No