Infinite Learning
Basic Training in EMDR Therapy
Registration Application

Please complete this form and mail or email to info@infinitelearning.love us with the rest of your application package.

- ☐ A copy of your CV or resume
- ☐ A copy of your professional license OR letters required for non-licensed applicants AND a copy of your intern registration from the licensing board *if applicable.*
- ☐ The participant agreement form
- ☐ Personal check, casher's check or money order, OR Zelle to payments@infinitelearning.love

If applying for an agency or student discount, please submit:

- ☐ The Agency Discount Form **and** ☐ Letter from your clinical supervisor (See Form)
- ☐ The Student Discount Form **and** ☐ Letter from your clinical supervisor (See Form)
- ☐ Certificate of completion of basic training in EMDR Therapy (for reviewer discount).

Name _____

Degree _____ Professional License _____

State and License/Registration Number _____

Address _____

City _____ State _____ Zip Code _____

Business Telephone _____ Fax _____

Home Telephone _____ Cell Phone _____ Email _____

How did you learn about our training? (Check all that apply) So that we can thank them!

☐ EMDR Therapy-trained colleague:
Name: _____ * Email: _____

☐ Referred by:
Name: _____ * Email: _____

☐ EMDRIA list of training providers
☐ Web search (indicate search engine if known, e.g. Google, Yahoo.) _____
☐ Kelly O'Horo social media
☐ Attending one of our presentations
☐ Other: _____

Registration for October 2026 Basic Training in EMDR Therapy

Dates: October 23 + 24, 2026 | November 6 + 7, 2026 | November 20 + 21, 2026 | December 11 + 12, 2026

Payment by personal check, casher's check or money order or by Zelle to payments@infinitelearning.love

Non-profit fee	$1,615
Early Rate	$1,675
Regular Rate	$1,775
Late Rate	$1,875
Refresher	$999

E**Standard registration received after September 23, 2026**

☐ $1,675

☐ $1,615 with agency or student discount. **Include agency or student form with registration*

S**Standard registration received after September 23, 2026**

☐ $1,775. Submit payment in full with registration package.

$1,875 late registration

☐ $999 for Refresher or Audit

Note: Licensed clinicians in HMO, VA and government settings are not eligible for the small agency discount.

Make your personal check, casher's check or money order payable to: **"Infinite Learning"** or **Zelle to Payments@infinitelearning.love**
Your check will not be cashed until you are accepted into the program and will be returned to you if you are not accepted.

*To pay by credit card You can also pay through Eventbrite for a 2.15% fee
You can also email info@infinitelearning.love a direct link will be provided to you for a 3.15% fee.

*To apply for a payment plan see last page.

Refund/Cancellation Policy:

If you cancel within 48 hours of registration, you'll receive a full refund. Otherwise, a $100 USD processing fee applies. Cancellations within 15 days of training are non-refundable, but the fee can be transferred to a future training, minus the processing fee. Once training begins, no refunds or transfers are granted, except in extenuating circumstances. We may cancel the training, in which case fees will be refunded or forwarded to future training dates.

After the training starts, no refunds will be made for changes in personal or business situations including medical events. Vacancies after the start of training cannot be filled. Refund requests must be in writing. Date determined by postmark or email. Should you need to withdraw after your acceptance, you may request a transfer for the next training cycle with a transfer fee of $150. Your original tuition remains nonrefundable. Please complete and submit the "*Transfer Request and Agreement*" form under those circumstances.

In signing below, I confirm that I have carefully reviewed and agree to the above refund/cancellation policy:

_____

Signature Date

Print Name_____

Please mail, email your completed registration package to: info@infinitelearning.love

Infinite Learning

Basic Training in EMDR Therapy Payment Installment Contract

I request to pay my tuition by credit card on an installment plan. I understand that by signing the credit card authorization below, I agree to be contractually bound by the tuition and refund policies described on this page. ***There will be a 3.15% additional fee for this service.***

Payment by Credit Card

Payment by Credit Card - Early registration received by September 23, 2026

_____ **Initial here to confirm your selection**. ☐ $1,675 in 2 installments (speak to instructor to agree on dates)

Standard registration received after September 23, 2026

_____ **Initial here to confirm your selection**. ☐ $1,775 with 2 installments (speak to instructor to agree on dates)

_____ **Initial here to confirm your selection.** ☐ $1,615 for agency or student discount with 2 installments 50% each. Please include the Agency or Student Discount Form with your registration package.

Note: Licensed clinicians in HMO, VA and government settings are not eligible for the small agency discount.

In signing below I confirm that I have carefully reviewed and agree to the above refund policy:

❑ MasterCard ❑ Visa ❑ Discover ❑ American Express

Credit Card #: _____/_____

Exp. Date CCV

Name as it appears on card: _____

Billing Address _____

City _____ State _____ Zip Code _____

_____

Signature Date