

(EFT) Emotional Freedom Techniques

Powerful Techniques to Transform Your Practice

WHAT YOU WILL LEARN:

This (EFT) Emotional Freedom Techniques seminar will teach you how to work with this brilliant yet simple method to dissolve emotional pain, trauma, anxiety, grief, frustration, stress and many other unpleasant emotions and painful memories. Practitioners will learn one simple protocol to treat a myriad of emotions and client's issues; creating rapid transformation of damaging beliefs and behaviors. The learning experience will be enhanced by lots of hands on practice and live demonstrations.

SEMINAR OBJECTIVES:

Participants will be able to:

- Discover how the energetic system is the missing link to healing core issues
- Use the basic clinical applications; including diagnostic point therapy locations are demonstrated and practiced
- Use EFT for addictive urges and manage cravings
- Use EFT to reduce anxiety, manage stress and physical pain
- How to find core issues that block progress
- Strengthen each session by using cognitive restructuring and positive affirmations with EFT
- Use EFT with trauma and grief
- Restructure limiting and sabotaging beliefs
- Learn the "art of EFT phrasing" to help the client create more dramatic shifts in cognitions ;emotional regulation and reduce emotional intensity
- Create positive choice statements that move the client into a positive frame and behavioral change
- Learn how to conduct effective phone sessions with EFT

Who Should Attend & Continuing Education Credit

This program is open to all healing professions, students and interns. This program is approved for 21 continuing education credits . CEU's approved for Licensed Mental Health Counselors, Licensed Marriage and Family Therapists, Licensed Social Workers (provider # - BAP-50-461 – expires 3-31-2013). For PhD & PsyD clinicians - 490 Board will accept certain courses that meet requirements for psychological skill training.

About the Speaker

Ruth Stern, MA has been a psychotherapist for over 29 years. She specializes in both **EMDR** and **EFT** in her private practice in Winter Park, Florida. Ruth specializes in the areas of anxiety, **PTSD** and clearing blocking beliefs with **EFT**. Currently, she conducts community seminars for personal transformation, managing stress and inner happiness. "In all my years of practice, I have never experienced such profound and rapid results in treatment; as well as being able to teach our clients the **EFT** process on their own. EFT is truly phenomenal and opens our experience to self empowerment, spiritual growth and lasting change". Ruth has developed 2 audio programs on **Healing Insomnia and Tap Into Happiness**.

Please visit my website to learn more about EFT www.TapToTransform.com



**REGISTRATION INFORMATION
EFT LEVEL I & LEVEL II**

Dates: Friday, June 8, 2012
thru
Sunday, June 10, 2012

Location:
Hilton Orlando/Altamonte Springs
350 S. Northlake Blvd.
Altamonte Springs, FL 32701
800-678-4380

Hotel Reservations:
Conference Rate : \$89
Call: 800-678-4380

Schedule:
Registration begins 8:30 AM
Workshop begins 9:00AM and concludes
5:00 PM each day

Tuition For:
**Licensed Counselors
and Healing Professionals:**

Early Registration \$390 (3 days)

(must be postmarked by May 18, 2012)

Late Registration \$420 (3 days)

How To Register:
There are 4 ways to register:

- **By mail** – complete and return form below
- **By phone** – Call 407-671-9555
- **By Fax** – Fax this form including your Visa or Master Card info. Fax: 407-671-7605
- **Pay-Pal**-, go to www.TapToTransfrom.com

REGISTRATION FORM

Please mail form to:

Ruth Stern, MA, 1177 Louisiana Ave. Ste. 214 – Winter Park, Fl. 32789

Please print:

Name: _____ Profession _____

Address _____

City _____ State _____ Zip _____

Professional License # _____ Lic. Exp. Date: _____

Email: _____

Home Phone: _____ Work Phone: _____

Please enclose payment with registration form. Check method of payment

_____ Check for \$ _____ (make payable to Ruth Stern, MA)

_____ Charge the amount of \$ _____ to my ___ Visa ___ Master Card

Card Number _____ Exp. Date _____

Signature _____