To support the Launch of Hearing Voices QLD network, Community partners are proud to welcome from the United Kingdom....

Dr. Rufus May - Living with Voices...
Understanding Voice Hearing and Promoting Recovery
A workshop for mental health professionals, consumers and carers.

About Rufus May...

Dr. Rufus May works as a consultant clinical psychologist in UK’s mental health services.

Rufus provides training in holistic approaches to recovery for mental health problems including hearing voices, unusual beliefs and extreme mood states.

Rufus organises self-help groups and public education meetings about different approaches to emotional wellbeing. His passion for this area is rooted in his own experiences of mental breakdown, psychiatric treatment and recovery in his late teens. Rufus’s work was featured in the channel 4 (UK) documentary, “The Doctor who Hears Voices”, which achieved acclaim and also debate about his creative approaches to supporting recovery.

For information on Hearing Voices Qld:
Website: www.hearingvoicesqld.org
Phone: 0417 104 488

Tuesday 21st April, 2015
Central Queensland University
Bruce Highway,
North Rockhampton QLD 4702
9.00am – 4.00pm

Lunch and light refreshments provided.

Workshop modules include:

- Hearing Voices Qld Launch Information
- Hearing voices research
- Recovery narratives
- Collaboratively developing an understanding of the issues voices represent.
- Ways to help voice hearers strengthen their sense of self and awareness.
- How to assist people to change their relationship with their voices.
- Voice dialogue, thinking and techniques.

Early Bird rates available until 3rd March 2015

Cost: $140 (waged) Early Bird $99 (+GST) $75(unwaged) Early Bird $60 (+GST)

Credit card fees are applicable through Eventbrite.

Please Note: Places are LIMITED so register ASAP. Scan a completed registration form to hearingvoicesqld@mail.com

Visit Eventbrite. For full venue details, directions and credit card sales.
REGISTRATION FORM

DR. RUFUS MAY - LIVING WITH VOICES… UNDERSTANDING VOICE HEARING AND PROMOTING RECOVERY

TUESDAY 21ST APRIL, 2015
ROCKHAMPTON

Email (scan as pdf) completed Registration form/s to - hearingvoicesqld@mail.com
Confirmation will be sent within 24 hours
Registrations close 16th April 2015

REGISTRATION INFORMATION

Please write in BLOCK letters and Black or Blue pen to complete this form

Title: __________________ Family Name _________________________________________ First Name __________________________

Position: _____________________________________________________________________________________________________________

Organisation: _________________________________________________________________________________________________________

Mailing Address: _____________________________________________________________________________ Post Code ________________

Contact Number: _________________________________ Fax: _____________________________ Mobile: _____________________________

Email Address: ________________________________________________________________________________________________________

Dietary Considerations: _______________________________________________________________________________________________

An Invoice will be sent following registration

Please tick

☐ Full Registration $ 140.00  ☐ Early Bird — $99.00 plus GST
☐ unwaged — $75 special offer $60 plus GST

How would you like to pay— ☐ Direct deposit ☐ Cheque ☐ Credit card (Plus Fee)

CANCELLATIONS: Cancellations should be submitted in writing to info@hearingvoicesqld.org. prior to the date of the course. Such
Cancellations received will receive a refund less $10.00 administration charge. If received 2 weeks or more before the course. Cancellation made after this and
not filled will be charged at 50%.Cancellations notified less than 72hrs prior to course commencement will be charged at full price. Substitute delegates may be
accepted provided they meet the criteria set for the course and HVQ has been notified of this change.
Final Registrations close 16th April 2015. One (1) registration form per person.

Office Use Only: Date Received ___ / ___ / ___
Invoice / Receipt No. ____________________________

---

CQUniversity AUSTRALIA
Queensland Alliance for Mental Health Inc.
Centacare CQ

---