



# Infinite Learning

## Basic Training in EMDR Therapy Registration Application

Please complete this form and mail or email to [info@infinitelearning.love](mailto: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, cashier's check or money order, OR Zelle to [payments@infinitelearning.love](mailto: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



☐ Registration for **January 2026 Basic Training in EMDR Therapy** (All Weekends ONLINE or in Phoenix AZ)

Dates: **January 9 + 10, 2026 | February 6 + 7, 2026 | March 6 + 7, 2026 | April 10 + 11, 2026**

**Payment by personal check, casher's check or money order or by Zelle to [payments@infinitelearning.love](mailto:payments@infinitelearning.love)**

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

Early registration received by November 25, 2025

☐ \$1,675

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

Standard registration received after November 25, 2025

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

☐ \$1,875 after December 26, 2025

☐ \$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](mailto: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:

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Signature

Date

Print Name

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Please mail, email your completed registration package to: [info@infinitelearning.love](mailto: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

Early registration received by November 25, 2025

\_\_\_\_\_ **Initial here to confirm your selection.** ☐ \$1,675 in 2 installments

Standard registration received after November 25, 2025

\_\_\_\_\_ **Initial here to confirm your selection.** ☐ \$1,775 with 2 installments

\_\_\_\_\_ **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.

\_\_\_\_\_ Special Payment Arrangement

**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