



## Step-by-Step Approach to the Assessment, Conceptualization, & Treatment of Anxiety Disorders

This course provides a clear roadmap and concrete interventions on how to assess, conceptualize and treat anxiety disorders using Cognitive-Behavioral Therapy (CBT) and Emotion-Focused Therapy (EFT).

Day 1: May 16, 2019

AM: **CBT for Panic Disorder & Phobic Disorders**

PM: **CBT for OCD Obsessive Compulsive Disorder**

Day 2: May 23, 2019

AM: **EFT for Social Anxiety Disorder**

PM: **EFT for Generalized Anxiety Disorder**

**Trainer: Ms. Natalie Tong**

**Registered Psychologist (HKPS)**

**Licensed Marriage & Family Therapist, LMFT #40466, California, USA**

Ms. Natalie Tong is a California Licensed Marriage & Family Therapist and a Registered Psychologist who has been practicing psychotherapy for over 20 years. She has served as an Honorary Lecturer at the University of Hong Kong for over 12 years. In her private practice, she works extensively with clients suffering from depression, anxiety and couple distress. In her individual work with clients, she has received supervision in Emotion-Focused Therapy from Professor Leslie Greenberg and she held a certification as an EFT Practitioner (Individual therapy) with the EFT Clinic, York University and HKCMAC. She integrated her EFT training with her training in clinical psychology in her teaching and her therapy work with her clients.



INSTITUTE FOR  
PROFESSIONAL TRAINING  
IN PSYCHOTHERAPY LIMITED  
專業輔導培訓學會有限公司

22/F, Weswick Commercial Building, 147-149  
Queen's Road East, Wanchai, Hong Kong

[www.iptp.com](http://www.iptp.com) [admin@iptp.com.hk](mailto:admin@iptp.com.hk) 2505- 7288

## **Course details:**

Dates & Time: May 16, 23, 2019 (Thursdays), 9:30am to 5:30pm

Venue: Institute for Professional Training in Psychotherapy Limited (IPTP)

Address: IPTP, 22/F, Weswick Comm. Bldg., 147-149 Queen's Road East, Wanchai, Hong Kong

Target participants: Social Workers, Counselors, Psychologists, Teachers, Health-Care Professionals

Language Medium: Cantonese (Training Notes in English)

## **Registration Procedure:**

### **Option A: Online Registration**

1. Go to the IPTP website, [www.iptp.com.hk](http://www.iptp.com.hk); click on "Upcoming Training" then click on the training title
2. Fill in the online registration form (Note: each individual participant will complete 1 online registration)
3. Deposit the training fee within 3 working days to the IPTP bank account OR prepare a crossed cheque
4. Email the deposit slip to [admin@iptp.com.hk](mailto:admin@iptp.com.hk) within 3 working days OR mail in the crossed cheque with your name and training title written in the back (IPTP address indicated above) within 3 working days.

### **Option B: Registration by Fax or Mail**

1. Fill in this Registration Form (Note: each participant will complete 1 registration form)
2. Deposit the training fee within 3 working days to the IPTP bank account OR prepare a cheque
3. Fax this form and deposit slip to 2505-7989 or mail the cheque & form to the above IPTP address

### **Course Fee: (Pls check one of the boxes) Early Bird Deadline March 15, 2019**

Regular Course Fee in Groups of 3: \$2400/person <input type="checkbox"/>	Early Bird Fee in Groups of 3: \$2000/person <input type="checkbox"/>
Regular Course Fee in Groups of 2: \$2500/person <input type="checkbox"/>	Early Bird Fee in Groups of 2: \$2200/person <input type="checkbox"/>
Regular Course Fee for Individuals: \$2600/person <input type="checkbox"/>	Early Bird Fee for Individuals: \$2400/person <input type="checkbox"/>
<input type="checkbox"/> Fee for Single Day registration: \$1300/per day per person: Please specify the date(s): _____	
<input type="checkbox"/> Fee for Single Session registration: \$700 per session per person: Pls specify the date & AM/PM: _____	

**Bank Account No.: 012-899-1-027107-0 Institute for Professional Training in Psychotherapy Ltd**

**Crossed Cheque payable to "Institute for Professional Training in Psychotherapy Limited"**

**All courses are non- refundable and non-transferrable to other persons or other IPTP courses**

**The date on the deposit slip or the date of the post stamp will be referred as the date of registration**

An email confirmation will be sent within 2 weeks to those who have successfully enrolled.

Full Name (English): (Ms./Mr.) \_\_\_\_\_ Full Name (Chinese): \_\_\_\_\_

(Pls indicate in BLOCK LETTERS your name which is to be printed in your certificate)

Email: \_\_\_\_\_ Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Cheque number: \_\_\_\_\_ Name of the Bank: \_\_\_\_\_

Name of Agency: \_\_\_\_\_ Work Title: \_\_\_\_\_ Years of experience: \_\_\_\_\_

**For those who register in groups of 2 or 3, please indicate the name(s) of your training partner(s) and ensure the names are consistent in their registration \_\_\_\_\_**