

Registration Form

CERTIFICATE COURSE IN DRAMTHERAPY

Samutthāna, the King's College London Resource Centre for
Trauma, Displacement and Mental Health, Sri Lanka.

Name: _____

Occupation: _____

Organization (if applicable): _____

Contact address:

Contact telephone: _____

Education: 1. _____

2. _____

3. _____

Email: _____

I heard about this course via:

- Email
 Flyer
 Word of mouth
 Other (please describe) _____

Please handover this form, including payment to:

Samutthāna
Centre for Trauma, Displacement and Mental Health
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Tel :- +94 0115767585/+94 0112883847 Email : info@samutthana.org.lk

VISIT: <http://srilankadramatherapy.wordpress.com/>