

C.G. Jung Institute - Boston

21 Hartford Street, Newton, MA 02461

(617) 796-0108

Spring 2020 Public Programs

March 03/27	Bees with Russell Holmes March 27 7:00 pm - 9:00 pm (\$30)		\$		
03/31-05/12	A 6-Week Evening Dream Group Experience for and Clinicians - Jill Fischer, PsyA, APRN, BC., IA (6) Tuesdays March 31 - May 12 7:00 pm - 9:00 (Psychology, MHC and SW CEs offered add \$10	AP pm <i>(\$200)</i>	\$		
April 04/24	Rekindling the Soul: Active Imagination April 24 1:30 pm – 4:30 pm (\$45)		\$		
May 05/01	Visiting Lecture Series: Culture, Racism and the May 01 7:00 pm - 9:00 pm (\$35) (Psychology, MHC and SW CEs offered add \$10)		\$		
05/02	Visiting Lecture Series: Dreaming in Color: Rac May 02 9:00 am - 12:00 pm (\$35) (3 Psychology, MHC and SW CEs offered add \$3		\$		
05/23	Embracing the Dark – The Black Madonna and May 23 1:00 pm – 4:00 pm (\$45)	the Emerging Feminine	\$		
June 06/13	Writing from the Four Functions June 13 9:30 (4 MHC and NASW CEUs offered add \$10)	am – 2:30 pm <i>(\$45)</i>	\$		
6/19-6/20	Summer Intensive: The Individual and the Coll (11 Social Work and MHC CEUs offered add \$1	0)	\$		
		Programs Total Members of Friends of Jung - Deduct 10% add \$10.00 flat fee for each program if available TOTAL DUE	\$ \$ \$		
with your payment. Make checks out to th Space is limited, so rea	ion Idete this Registration Form then enclose it e C.G. Jung Institute- Boston. gister as soon as possible to ensure a place our choice. Once a program is full, registrations	Registration Form Name Address			
will not be allowed at the door.		Telephone			

Refund Policy

If you withdraw from a program at least 48 hours before the program starts, we will send you a refund of your program fee minus a \$20 processing charge. If you contact us to withdraw from a program less than 48 hours before the program start date, we will arrange a credit of 50% of the program fee to be used within two years for another Institute/NESJA program. No refunds or credits are issued on or after a program's start date.

Registration	Form		
Name			
Address			
Telephone			
Email			

Please make checks payable to: C.G. Jung Institute - Boston

Mail to: C.G. Jung Institute - Boston,

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