



The Kinesiology Connection

594 Marrett Road #20

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The Brain Gym® Teacher Practicum

The Co-creative model for teaching, learning and living.

Instructor: Bonnie Hershey, M.Ed.

The Teacher Practicum provides the skills to support the emergence of the authentic teacher in each participant. This course is designed for those who wish to develop and successfully teach Brain Gym in a class or private format. The Teacher Practicum provides instruction in theory, teaching methods, and procedures and is highly transformational on the personal level. This class will give you a deeper understanding of Educational Kinesiology and broaden your base and your use of Brain Gym, both personally and professionally. Licensure is through the Edu-K Foundation.

Prerequisites: Brain Gym® 101, Edu-K In Depth, Optimal Brain Organization (formerly BOP), electives and current Edu-K Foundation membership (payable by check or credit card to the Edu-K Foundation at class time). Check www.braingym.org for a current licensure checklist.

Dates: Thursday-Sunday, December 3-6, 2009 • 9am to 6pm (we will end at 4pm on Sunday).

Please note that this is an intensive training with nightly assignments and culminates in marketing presentation demos, which you may want to give previous thought and preparation.

Fees: \$595, \$545 when registered by October 22 • Repeat fee: \$300

A non-refundable \$100 deposit is required for registration.

•**Bonnie Hershey, M.Ed.**, is a Brain Gym® and Touch for Health instructor, International Faculty Member of Brain Gym® International, and the director of The Kinesiology Connection in Lexington, MA. In addition to teaching Touch for Health, Brain Gym® 101 and the Brain Gym® Teacher Practicum, Bonnie has presented inspiring and energetic Brain Gym® introductions throughout New England.

Mail or fax this form with your payment (check, MC or Visa) and registration to:

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I have fulfilled all prerequisites for licensure_____. I am re-licensing_____and I am current with Foundation dues. Please bring completed case studies, checklist and *BG 101 Handbook*.

I am enclosing a \$100 nonrefundable deposit_____or full payment of_____.

Name _____ Please send me hotel information.

Address _____ I would like to share a room.

_____ Zip code_____

Phone (h) _____ (w) _____

Fax _____ e-mail _____

MC or Visa number _____ Expiration_____ Signature _____