

RCM DID Training Program Application Level II

I would like to attend the following Internship(s): Audit only Certification
Registration Deadline: July 22

Unit 4: The Human Dynamics of Ritual Abuse Unit 7: The Kingdom of Darkness
 Unit 5: The Control Dynamics of Ritual Abuse Unit 8: Renunciation Writing
 Unit 6: The Spiritual Dynamics of Ritual Abuse Unit 9: Prenatal Healing II

Units 4-6 must be taken together in the same year.

See eligibility and prerequisites for each Unit in the RDT Booklet or on the website.

Name _____

E-mail _____ Phone _____

Name of ministry or therapeutic practice: _____

If you do not minister to ritual abuse clients within a specified ministry or therapeutic practice, please describe the context and extent that you minister to them.

For how many years have you worked with RA clients? _____

How many RA survivors have you ministered to if less than 5? _____ Check here if more than 5 _____

I am a licensed therapist/counselor/social worker. I am a prayer minister.

I am also a survivor. (*This will be kept confidential.*) Check all that apply:

Trauma survivor Survivor with dissociation/DID Survivor of ritual abuse

I am currently receiving ministry I am now integrated

Survivors who are in active ministry to other survivors will be considered but need to be stable and responsible for their own well-being.

Please list the names and email addresses for two non-family members who can verify your ritual abuse ministry experience.

Name _____ Email _____

Name _____ Email _____

I understand and agree that the RCM staff reserves the right to refund the registration fee and to block the participation of any person who is perceived to be unable to cope with the material presented and/or whose presence is perceived to be disruptive or a threat to others in attendance.

Signature _____ Date _____

Tentative acceptance will be made within 2 weeks of receiving application and completed references, pending completion of prerequisites.

Options for payment will be given with notice of acceptance.

Continued ...

Registration Fees

(See RDT program booklet for available discounts for repeat attendees)
and alumni of the Tom Hawkins Memorial Internship.)

Financial assistance available by request.

UNIT 4

Payment Deadline: Aug 29

Audit only: \$125 minus \$75 prerequisite rebate = \$50
Certification: \$175 minus \$90 prerequisite rebate = \$85

UNIT 7

Payment Deadline: Sept 30

Audit only: \$240
Certification: 290 minus \$15 prerequisite rebate = \$275

UNIT 5

Payment Deadline: Sept 9

Audit only: \$150
Certification: \$200

UNIT 8

Payment Deadline: Oct 8

Audit only: \$250
Certification: \$300

UNIT 6

Payment Deadline: Sept 17

Audit only: \$275 minus \$20 prerequisite rebate = \$255
Certification: \$325 minus \$25 prerequisite rebate = \$300

UNIT 9

Payment Deadline: Oct 30

Audit only: \$250
Certification: \$300

Retaking of certification exam: \$15

Retaking of practicum: \$30

**20% off for RCM Partners, married couples or
ministry colleagues coming as a group of 2 or more.**

Please return your completed form to the Office Manager:

- Email: rcmoffice@rcm-usa.org
- Fax: 540-249-9716
- Mail: RCM, PO Box 479, Grottoes, VA 24441-0479

(Please note that information sent by e-mail is less secure.)