The Centre for Mindfulness Studies

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Insurance Receipt

Client
Registrant Name
Mailing Address
Date of Birth: DD, Month, YYYY

Date
Date of last session (Session 8)

Provider
Facilitator Name *Credentials*
Insurance Registration Number
Mailing Address

Description	Quantity	Time	Cost
Mindfulness-Based Cognitive Therapy Group therapy program. Skills building and lifestyle counselling for stress, anxiety, and depression management. This program is offered in conjunction with The Centre for Mindfulness Studies. Program Start Date – Program End Date	1	22 hours	$520
Orientation & Interview – date		*2 hours*	*$48*
Session 1 – date		*2.5 hours*	*$59*
Session 2 – date		*2.5 hours*	*$59*
Session 3 – date		*2.5 hours*	*$59*
Session 4 – date		*2.5 hours*	*$59*
Session 5 – date		*2.5 hours*	*$59*
Session 6 – date		*2.5 hours*	*$59*
Session 7 – date		*2.5 hours*	*$59*
Session 8 – date		*2.5 hours*	*$59*
TOTAL	**1**	**22 hours**	**$520**

SAMPLE

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Facilitator Name *Credentials*

Date of signing

Date