

Specialist Child/Adult  
Psychiatrist

# ADD/ADHD WORKSHOP

Everything You Have Ever Wanted To Know

Presented by

**Dr. S.A. Jeeva & ADHD CLINIC TEAM**

## Dr. Jeeva TV Appearances

**Tues. 17 Sept, 16h30, SABC 3:**  
"3 Talk with Noleen".

**Sat. 21 Sept, 14h00, DStv 404:**  
"Health Talk", on SABC News 24.

**Sat. 28 Sept, 08h30, SABC 2:**  
"Bonitas House Call". Dr. Victor.



[www.adhdclinicjeeva.com](http://www.adhdclinicjeeva.com)

**Date:** Sunday, 05 MARCH 2017

**Time:** 08h00 to 17h00.

**Venue:** EDEN COLLEGE, 52 Johannesburg Rd, LYNDHURST, 2192

**Cost:** Full Day: R790

(per delegate)

*Includes:*

- DVD & notes.
- Light breakfast.
- Refreshments.
- Lunch (conventional/vegetarian).

Half Day: R590

*Includes:*

- Morning **OR** afternoon session.
- DVD & notes for full day.

**Tax-Deductible:** Workshop registration fee is tax-deductible if you/spouse/child has ADD/ADHD.

**Group Discount:** For 10 PAID registrations from *one* institution, **get 2 FREE additional registrations**. For groups larger than 10 delegates, call the office for information on further group discounts.

**Scholarships:** Available for teachers/staff from *qualifying* schools/NGOs.

**Register now!**  
**Limited space.**

## TARGET AUDIENCE

Adult ADD/ADHD Patients, Parents, Spouses, Teachers,  
Psychologists, Therapists, Social Workers, Medical Professionals.

## Workshop Programme

07h30 – 08h15: Registration.

08h00 - 08h30: **Introduction & new developments**

08h30 - 10h00 : ADHD in children & adolescents

10h00 - 10h15 : Tea / coffee break

10h15 - 11h00 : ADHD comorbidities (consequences of no treatment)

11h00 - 12h15 : Learning disabilities – Terri Wilke, Educational pshycologist

12h15 - 13h15 : LUNCH

13h15 - 14h45: **ADHD Friendly classroom – Terri Wilke**  
Supporting learners, teachers & parents

14h45 - 15h00 : Tea / coffee break

15h00 - 17h00 : Holistic Treatment

**Mindfulness – Tracey Pinder (ADHD Life coach)**

Medications to give & not to give.

17h00 - 17h30: Questions & Answers (optional attendance).

## Office Contact Details

**Phone:** 011 – 440 – 4425 / 9

**Email:** [nat.c@adhdclinicjeeva.com](mailto:nat.c@adhdclinicjeeva.com)

**Fax:** 011 440-4414

**Website:** [www.adhdclinicjeeva.com](http://www.adhdclinicjeeva.com).

## Registration: Deadline: 27 FEB 17.

Email / fax registration form to office.

Obtain registration form by:

1. Downloading it from website.
2. Requesting it by phone/email.

## REGISTRATION FORM

**Register now!  
Limited space.**

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Everything you have ever wanted to know about ADD/ADHD.

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## DISCOUNT

For every 10 paid registrations from one institution, get 2 free additional registrations.

## TAX-DEDUCTIBLE

Workshop registration fee is tax-deductible if you/spouse/ child has ADHD.

## SCHOLARSHIPS

Available for staff from qualifying schools/NGOs.

### IMPORTANT:

- Complete one registration form per delegate.
- Enquiries: 011- 440-4425
- Submit registration form and proof of payment TOGETHER to:

**Fax: 011 440-4414 / Email: [nat.c@adhdclinicjeeva.com](mailto:nat.c@adhdclinicjeeva.com)**

## DELEGATE INFORMATION

<b>DELEGATE INFORMATION</b>			
Please Circle:	Full Day	Morning Session ONLY	Afternoon Session ONLY
For full day workshop: Please circle lunch preference:		Conventional	Vegetarian/Halaal
Part of a Block Booking? Please Circle:	YES	NO	
Name of School / Institution:			
Institution Tel:		Institution Email:	
PERSONAL DETAILS: Surname:			Initials:
Name:			Title:
Daytime Tel:		Postal Address:	
Cell:		Email:	
Please indicate the capacity in which you are attending (e.g. ADHD patient, parent, teacher etc.):			
If attending in professional capacity, please indicate your specialty/field:			
If attending as teacher, please specify your position/role/department at school:			
<ul style="list-style-type: none"> <li>• How did you hear about this workshop?             <ul style="list-style-type: none"> <li>○ Please specify institution / channel: _____</li> </ul> </li> </ul>			
<b>BANKING DETAILS:</b>	<b>FNB</b>	Reference:	Please use your <i>initials and surname</i> .
Branch:	Melrose Arch	Branch Code:	261251
Account Name:	DR SA Jeeva	Account No:	625 5316 5103

### TERMS & CONDITIONS:

1. **Workshop registration deadline: 27 FEBRUARY 2017.** Seats are limited. Register early to avoid disappointment. Late registrations will be accepted by special arrangement only.
2. Workshop registration is only done on submission of a completed registration form together with proof of payment. A confirmation email or sms will be sent to signify successful registration.
3. Two free additional registrations for every 10 paid registrations from one institution. For groups larger than 10 delegates, call the office for information on further group discounts. For the discount to apply, a list of names must be submitted at least one day prior to submission of individuals' registration form and proof of payment.
4. **Submission of this registration form confirms that the delegate accepts the terms and conditions as set out above.**