

**Educational Seminars in Bowen
Family Systems Theory**

Time: Friday 9:30 A.M. – 4:00 P.M.

**Location: Higgins University Center
Persky Conference Room
Clark University
950 Main Street
Worcester, MA 01610-1477**

For directions go to www.clarku.edu

Seminar Fees (except 11/19/10)

Cost per Session \$65 _____
Student w/ ID or Retiree \$40 _____
Clark University student/faculty No Fee

**Certificate of Attendance
is available for all sessions**

Total Fee Enclosed * \$ _____

* transfer amount to registration form

(Lunch is available on campus)

*For questions about the program or
financial need contact Ann V. Nicholson
ann.nicholson@verizon.net
(617-296-4614)*

Please make checks payable to:
New England Association of Bowen Theorists, Inc

If you prefer to mail registration in advance send at least two weeks before to:
Charlie Davison, Administrative Assistant
210 Cedar Street, #7
Seymour, CT 06483

*The New England Seminar on Bowen Theory
is part of a developing national network of
centers devoted to the study of Bowen theory*

PROGRAM
Presentations

- 9/17/10 **Theoretical Concepts of Bowen Theory -
Taped Presentations by Murray
Bowen, MD**
- 11/19/10 **Evidence for the Triangle Hypothesis in
Collected Individual Coaching Sessions of
Murray Bowen, MD**
Laurie Lassiter, PhD, LICSW
(Separate Brochure to Follow)
- 2/11/11 **Application of Bowen Theory to Health
Care:**

**Planning Health Care for the Family Unit
via the Lens of Classical Homeopathy**
Lauren Fox, FNP, BC
- Bowen Theory in Populations at Risk –
Attempts to Differentiate a Self in an
Anxious Field**
Donna Caron, RN, MS
- 6/10/11 **Application of Bowen Theory to the
Emotional Challenges of Everyday Life**
Selden Dunbar Illick, LCSW

Afternoon Presentations
(2/11/11 and 6/10/11 only)

*Participants are invited to present on their own family,
clinical families, work system or research interest.*

**Contact Ann V. Nicholson regarding cancellations due to
weather conditions. (617-296-4614)**

**Please see our web page:
www.bowentheoryne.org**

***New England Seminar on
Bowen Theory***

REGISTRATION FORM

*Please send at least two weeks before or
submit on the day of the conference*

Name: _____

Address: _____

City: _____

State: _____ *Zip:* _____

email: _____

Phone(home): _____

Phone(cell): _____

Degree/Field: _____

Current position: _____

\$ _____ Total registration amount