

## The 11<sup>th</sup> TCVM Annual Conference Registration Instruction



### Prerequisites:

1. Licensed Veterinarian.
2. To all new students of Chi Institute, a **one-time non-refundable \$100 application fee** is required for application process and document student file. The registration will not be processed without the application fee.

### Step-by-Step Instructions on the Registration Form:

- Step 1. Check which TCVM courses you have previously attended.
- Step 2. Fill out contact information.
- Step 3. Select the registration time-bracket(s) for the course selected. The full payment must be received or postmarked 30 days before the beginning of the conference. A \$50 late fee will be charged if the payment is sent within 1-29 days before the beginning of the conference. An additional \$100 onsite registration fee will be charged if the participant waits to pay the tuition on site.
- Step 4. Select the Method of Payment.
- Step 5. If you are the new student of Chi Institute, please attach a brief biographical sketch explaining your type of work and your motivation for attending our program(s). Please indicate any previous exposure or experience with Traditional Chinese Medicine including acupuncture or Chinese herbals. Please also attach a recent passport photograph of yourself. Please note a one-time non-refundable **\$100 application fee** is required for application process and student file.
- Step 6. Please print and SIGN this form. Mail and fax (if possible) the signed form with your payment to us by using the contact information at the top of the page.

### Refund Policy:

Cancellations may be made by phone but a cancellation letter must be submitted to Chi Institute in writing via fax, mail or email and signed by the doctor who is canceling before the refund is issued.

- More than 30 days prior to class date = 100% refund for payment by check and 96% refund for credit card.
- 15 to 29 days prior to class date = 75% refund/71% for credit card
- Within 15 days of the class date = No refund



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## The 11<sup>th</sup> TCVM Annual Conference Registration Form

**STEP 1: Please check courses you previously attended.**

Veterinary Acupuncture: <input type="checkbox"/> Small Animal <input type="checkbox"/> Equine <input type="checkbox"/> Mixed	Where: _____ When: _____
TCVM Clinical Approach / Herbology: <input type="checkbox"/> HT/LU <input type="checkbox"/> SP/ST <input type="checkbox"/> Liver/Endo <input type="checkbox"/> Kid/Geri <input type="checkbox"/> Derma/Immu	
Advanced Programs: <input type="checkbox"/> Veterinary Tui-na <input type="checkbox"/> TCVM Annual Conference <input type="checkbox"/> Tongue/Pulse Diagnosis & Classical Points	

**STEP 2: Contact Information/Preferred Mailing Address. Please print or type all information clearly.**

NAME	First Name:	Middle Name:	Last Name:
TITLE	NICKNAME		LICENSE #
BUSINESS	PRACTICE <input type="checkbox"/> Small Animal <input type="checkbox"/> Equine <input type="checkbox"/> Mixed <input type="checkbox"/> Other _____		
ADDRESS (W)	Street Address:		
	City:	State:	Zip Code: Country:
ADDRESS (H)	Street Address:		
	City:	State:	Zip Code: Country:
TELEPHONE	Work:	Home:	Fax:
EMAIL	Public: For Chi Institute only:		

**STEP 3: Please select the Registration Time-Bracket(s).**

Fees	The 11th TCVM Annual Conference (Nov 19-22, 2009)
<input type="checkbox"/> US \$100 (Application Fee, new student only) <input type="checkbox"/> US \$100 (TCVM Fundamental Theories DVD, recommended if you have not learned Yin Yang, Five Elements and Eight Principles before) <input type="checkbox"/> US \$100 (Introduction to Chinese Herbal Medicines DVD, recommended if you have not taken any Chinese herbal courses before)	<input type="checkbox"/> US \$750 paid before Oct 20, 2009 <input type="checkbox"/> US \$800 paid during Oct 21 - Nov 18, 2009 <input type="checkbox"/> US \$850 paid during Nov 19 - 22, 2009
<b>Grand Total:</b>	<b>\$</b>

**STEP 4: Please select the method of your payment and answer the question.**

<input type="checkbox"/> CHECK NO: _____ ALL checks must be drawn on USA Banks - US Dollars Only Payable to: Chi Institute of Chinese Medicine. (Include your name on the memo line If pay by company check).	
<input type="checkbox"/> VISA <input type="checkbox"/> MASTER <input type="checkbox"/> AMERICAN EXPRESS <input type="checkbox"/> DISCOVER Billing Zip Code: _____ Please charge \$_____ on this credit card now. <input type="checkbox"/> Charge tuition on this card 30 days before the conference.	
CARD NO: _____ EXP. ____/____ SIGNATURE: _____ DATE: _____	
<b>How did you know this program?</b>	<input type="checkbox"/> Friends _____ <input type="checkbox"/> Conference _____ <input type="checkbox"/> Magazine _____ <input type="checkbox"/> Internet _____ <input type="checkbox"/> Mailer <input type="checkbox"/> Email <input type="checkbox"/> Other _____

**STEP 5: If this is the first time you register courses with us, please attach a brief biographical sketch and a recent photograph of yourself. A non-refundable \$100 application fee is required for all new students.**

**STEP 6: Please print and SIGN this form. Mail and fax (if possible) the signed form with your payment to us by using the contact information at the top of the page.**