

The 13th 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 physically in our office by 30 days before the beginning of the conference. A \$50 additional fee will be charged if the payment is sent within 29 days before the beginning of the conference.
- 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

The 13th Annual TCVM 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: _____
Veterinary Herbal Medicine: <input type="checkbox"/> HT/LU <input type="checkbox"/> SP/ST <input type="checkbox"/> Liver/Endo <input type="checkbox"/> Kid/Geri <input type="checkbox"/> Derma/Immune/Oncology	
Advanced Programs: <input type="checkbox"/> Certified Veterinary Tui-na <input type="checkbox"/> TCVM Annual Conference <input type="checkbox"/> Tongue/Pulse Diagnosis & Classical Points	

STEP 2: Personal Information (ALL INFORMATION IS REQUIRED)

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

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

The 13th TCVM Annual Conference (Nov 3-6, 2011)			
Date	Session	Conference Registration Fee	Other Fees
Nov. 3 to 6, 2011	All Sessions	<input type="checkbox"/> \$650 paid by Oct 5 th , 2011 <input type="checkbox"/> \$750 paid after Oct 5 th , 2011	<input type="checkbox"/> Application Fee: US \$100 (one-time fee required for new student only) <input type="checkbox"/> TCVM Fundamental Theories DVD: \$100 (recommended to those who are new to TCVM) <input type="checkbox"/> Intro. to Chinese Herbal Medicine DVD: US \$100 (recommended to those who have not taken any Chinese herbal courses before)
Nov. 3 to 4, 2011	Neurological Diseases Session	<input type="checkbox"/> \$400 paid by Oct 5 th , 2011 <input type="checkbox"/> \$475 paid after Oct 5 th , 2011	
Nov. 5 to 6, 2011	Exotic Animals Session	<input type="checkbox"/> \$300 paid by Oct 5 th , 2011 <input type="checkbox"/> \$375 paid after Oct 3 rd , 2011	
Grand Total:		\$	

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. (Please include your name on the memo line if paying by company check).	
Credit Card #: _____ EXP. ____/____ Security Code: _____	
Billing Street Address and Zip Code: _____	
Please charge \$ _____ on this credit card now. <input type="checkbox"/> Charge tuition on this card 30 days before the conference.	
SIGNATURE: _____ DATE: _____	
How did you know of this program?	<input type="checkbox"/> Friends _____ <input type="checkbox"/> Show _____ <input type="checkbox"/> Magazine _____ <input type="checkbox"/> Internet _____ <input type="checkbox"/> Mailer _____ <input type="checkbox"/> Email _____ <input type="checkbox"/> Other _____

STEP 5: 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. Please use a dark pen when faxing.

Bio Sheet to Accompany Registration for Student File

(Required for all new students; previous students please update if appropriate)

Name: _____

Title: _____

I graduated from _____ **Veterinary School in**

19____ **200**__

I have **have not** **previously studied acupuncture.**

I have **have not** **previously studied Chinese herbs.**

Previous Background, if applicable:

My current practice specializes in:

I work on Small Animals Y N Equine Y N Exotics Y N Other:

My goals in studying TCVM are:

Some personal information about me and my interests:

Signed: _____ **Date**_____

(Use reverse side if more room is needed)