



The 14th Annual TCVM Conference and Pre-conference Tour in China Registration Instruction and Policy

Registration Instruction

- Step 1. On the attached form, please check the courses you have previously attended.
- Step 2. Please fill out your personal information. All information is required.
- Step 3. Please select the registration time-bracket(s). A \$750 per person deposit is due by 5 months before the conference starting date. The whole payment is due 3 months prior to departure.
- Step 4. Please select the method of your payment.
- Step 5. Please mail in the registration form(s) and then fax, if possible, to the Chi Institute at (866)700-8772.

Tentative Itinerary (*the detailed itinerary may be found at www.tcvm.com*)

Please book your round trip international flight to/from Shang-hai International Airport (PVG).

- Oct 20, 2012: Pick up at Shang-hai international airport, welcome banquet
- Oct 21, 2012: Fly to Gui-lin, Guangxi province
- Oct 22-25, 2012: Tour at Gui-lin
- Oct 26, 2012: Fly to Su-zhou, Zhejiang province
- Oct 27, 2012: Tour around Su-zhou/Shang-hai
- Oct 28 to 30, 2012: Conference at Su-zhou
- Oct 31, 2012: Departure home from Shang-hai

Cancellation and 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. Regardless of reason, cancellations result in a costly process due to nature of airfare and accommodation contracts. To offset these costs, the following fees apply. In fairness to others, we cannot make exceptions.

- Cancellation requested before 07/20/2012 = 100% refund.*
- Cancellation requested during 07/20/2012 - 07/31/2012 = 100% - \$300 (cancellation fee) per person refund.*
- Cancellation requested during 08/01/2012 - 08/11/2012 = 100% - \$750 (cancellation fee) per person refund.*
- Cancellation requested during 08/12/2012 - 09/11/2012 = 50% refund.*
- Cancellation requested during 09/12/2012 - 10/12/2012 = 25% refund.*
- No refund 7 days or less before departure.

** For all refunds of payment by credit card, 4% of the refundable amount will be charged.*

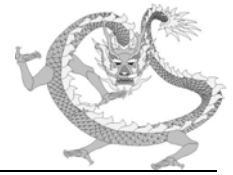
Important Dates to Remember:

- 05/21/2012: \$750 deposit per person due.
- 07/20/2012: Whole Payment due.
- After 10/12/2012: NO REFUND.

Cancellation of a tour by Chi Institute:

Chi Institute reserves the right to cancel the tour for any reason, but will not cancel a tour less than 90 days before departure except for unusual or unforeseen circumstances outside the company's control.

For more information please visit our website www.tcvm.com or call us at 800-891-1986.



The 14th Annual TCVM Conference and Pre-conference Tour in China Registration Form

STEP 1: Personal Information (ALL INFORMATION IS REQUIRED)

| | | | | | |
|-------------------------|---|---|----------|--------------|--|
| Passport Name | (as exactly appears on passport) | Passport # | | Title | |
| Date of Birth | Practice | <input type="checkbox"/> Small Animal <input type="checkbox"/> Equine <input type="checkbox"/> Other: | | | |
| Address (work) | Street Address: | | | | |
| | State: | Zip Code: | Country: | | |
| Address (home) | Street Address: | | | | |
| | State: | Zip Code: | Country: | | |
| Telephone | Work: | Home: | Fax: | | |
| Email | Public: | For Chi Institute Only: | | | |
| Food Preferences | <input type="checkbox"/> Vegetarian <input type="checkbox"/> I don't drink alcohol <input type="checkbox"/> Special requests (specify): | | | | |
| Emergent Contact | Name: | Phone Number: | | | |

STEP 2: Please select the Registration Time-Bracket(s).

| Pre-conference Tour in China (Oct 20-26, 2012) | 14 th TCVM Conference (Oct 26-31, 2012) | Memo |
|---|---|--|
| <input type="checkbox"/> US \$1,725 (sharing room – double occupancy) <input type="checkbox"/> US \$200 (own room – single occupancy) <input type="checkbox"/> - US \$200 early registration discount if \$750 deposit is paid by May 21, 2012 and the whole payment is made by July 20, 2012 | <input type="checkbox"/> US \$1,725 (sharing room – double occupancy) <input type="checkbox"/> US \$200 (own room – single occupancy) <input type="checkbox"/> - US \$200 early registration discount if \$750 deposit is paid by May 21, 2012 and the whole payment is made by July 20, 2012 | <ul style="list-style-type: none"> ▪ This registration fee includes China domestic air tickets, local transportation, 4 or 5 stars hotel accommodations, 3 meals per day, tours, conference and proceedings, Tai-ji, food therapy and TCM well-care activities. ▪ This registration fee does not cover the international air ticket to/from China. |
| Hotel room sharing preference (only needed if you choose the sharing room rate above) | | |
| <input type="checkbox"/> Share my hotel room with: _____ <input type="checkbox"/> No specific preference for my roommate. | | |
| <input type="checkbox"/> Match a roommate for me based on the following preference. Preferred roommate gender: <input type="checkbox"/> Male <input type="checkbox"/> Female | | |
| Other special request: _____ | | |
| <i>The Chi Institute will try it's best to help match the roommate for you and may not be able to find the ideal one to match. Therefore, if the roommate match fails, your registration will be transferred to single occupancy room and price category.</i> | | |

STEP 3: 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. ____/____ Name on Card: _____ | |
| Billing Zip Code: _____ Security code: _____ (Required) Please charge \$ _____ on this credit card now. | |
| <input type="checkbox"/> Charge \$750 deposit on the above card on May 21, 2012 <input type="checkbox"/> Charge the whole balance on the above card on July 21, 2012 | |
| <i>By signing this form, I agree to the terms and policy of the 14th TCVM Conference and China Tour 2012.</i> | |
| 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 4: 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.

The 14th Annual TCVM Conference and Pre-conference Tour in China Registration Form
(Optional, for veterinarian's family members or friends only)

STEP 1: Personal Information (ALL INFORMATION IS REQUIRED)

| | | | |
|-------------------------|---|----------------------|---------------|
| Passport Name | (as exactly appears on passport) | | |
| Passport # | | Date of Birth | |
| Vet's Name | | Relationship | |
| Address (work) | Street Address: | | |
| | State: | Zip Code: | Country: |
| Address (home) | Street Address: | | |
| | State: | Zip Code: | Country: |
| Telephone | Work: | Home: | Fax: |
| Email | For Chi Institute Only: | | Public: |
| Food Preferences | <input type="checkbox"/> Vegetarian <input type="checkbox"/> I don't drink alcohol <input type="checkbox"/> Special requests (specify): | | |
| Emergent Contact | Name: | | Phone Number: |

STEP 2: Please select the Registration Time-Bracket(s).

| Pre-conference Tour in China (Oct 20-26, 2012) | 14th TCVM Conference (Oct 26-31, 2012) | Memo |
|---|--|--|
| <input type="checkbox"/> US \$1,725 (sharing room – double occupancy) <input type="checkbox"/> US \$200 (own room – single occupancy) <input type="checkbox"/> - US \$200 early registration discount if \$750 deposit is paid by May 21, 2012 and the whole payment is made by July 20, 2012 | <input type="checkbox"/> US \$1,525 (sharing room – double occupancy) <input type="checkbox"/> US \$200 (own room – single occupancy) <input type="checkbox"/> - US \$200 early registration discount if \$750 deposit is paid by May 21, 2012 and the whole payment is made by July 20, 2012 <i>A local tour will be arranged during the conference for family/friend group.</i> | <ul style="list-style-type: none"> ▪ This registration fee includes China domestic air tickets, local transportation, 4 or 5 stars hotel accommodations, 3 meals per day, tours, conference and proceedings, Tai-ji, food therapy and TCM well-care activities. ▪ This registration fee does not cover the international air ticket to/from China. |

STEP 3: Please fill the payment information.

| |
|--|
| <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). |
| Credit Card #: _____ EXP. ____/____ Name on Card: _____ Billing Zip Code: _____ Security code: _____ (Required) Please charge \$ _____ on this credit card now. <input type="checkbox"/> Charge \$750 deposit on the above card on May 21, 2012 <input type="checkbox"/> Charge the whole balance on the above card on July 21, 2012 <i>By signing this form, I agree to the terms and policy of the 14th TCVM Conference and China Tour 2012.</i> SIGNATURE: _____ DATE: _____ |

STEP 4: This form may be copied or duplicated. If there is more than one of your family members or friends wish to go with you, please complete a separate form for each person.

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.