

Canine Acupuncture Course 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).
- Step 4. Please select the method of your payment.
- Step 5. Please email, fax, or mail in the registration form(s), if possible, to the Chi Institute at (800) 860-1543.

Cancellation and Refund Policy:

Cancellations may be made by phone but a cancellation letter must be submitted to the Chi Institute via fax, mail or email and signed by the student who is canceling before the refund is issued. Regardless of the reason, cancellations result in a costly process due to the nature of airfare and accommodation contracts. To offset these costs, the following fees apply. In fairness to others, we cannot make exceptions.

Cancellation requested over 90 days before the class starting date = 100% refund.*

Cancellation requested 60 days to 90 days before the class starting date = 100% - \$200 (cancellation fee).*

Cancellation requested 40 days to 59 days before the class starting date = 75% refund.*

Cancellation requested 20 days to 49 days before the class starting date = 50% refund.*

Cancellation requested 8 days to 19 days before the class starting date = 25% refund.*

No refund 7 days or less before departure.

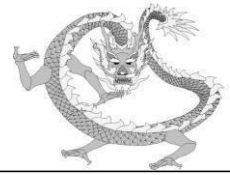
** For all refunds of payment by credit card, 4% of the refundable amount will be charged.*

Please note a \$25 fee is required for all wire transfers.

Important Dates to Remember:

- Upon registration: \$100 Application fee due (for new Chi student only)
- 1/15/2019: minimum \$950 deposit due.
- 3/15/2019: Whole Payment due.
- After 3/6/2019: NO REFUND.

For more information, please visit our website www.tcvm.com or call us at 800-860-1543.



Canine Acupuncture Course, China Registration Form

STEP 1: Please check courses you have 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 Courses: <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***)

Passport Name	(exactly as appears on passport)			Nickname	
Passport #		Title		License #	
Date of Birth		<input type="checkbox"/> Male <input type="checkbox"/> Female	Practice	<input type="checkbox"/> Small Animal <input type="checkbox"/> Equine <input type="checkbox"/> Other:	
Address (work)	Business Name:				
	Street Address:				
	City:	State:	Zip Code:	Country:	
Address (home)	Street Address:				
	City:	State:	Zip Code:	Country:	
	Telephone				
	Work:	Home:	Fax:		
Email	Public: _____ For Chi Institute Only (required): _____				
Food Preferences	<input type="checkbox"/> Vegetarian <input type="checkbox"/> Regular <input type="checkbox"/> Special requests (specify): _____				
Emergency Contact	Name:		Phone Number:		

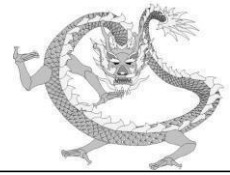
STEP 3: Please select the Registration Time-Bracket(s).

Application Fee	Canine Acupuncture Course March 1 – May 12, 2019 online; May 13-16, 2019 on-site	
<input type="checkbox"/> Application Fee: \$100 (new student only, due with registration)	<input type="checkbox"/> Tuition: \$2,405 if a minimum \$950 deposit is paid before Jan. 15, 2019 and tuition paid in full before Mar. 15, 2019. <input type="checkbox"/> \$200 late fee applied if a minimum \$950 deposit is not paid before Jan. 15, 2019 and tuition paid in full before Mar. 15, 2019.	<i>Tuition covers instruction and handout; lunch during class; transportation to the classroom and lab, events and activities during the class.</i> <input type="checkbox"/> DOUBLE occupancy hotel room at a four-star Hotel from May 14-16, 2019 (checkout on May 17): \$500 <input type="checkbox"/> SINGLE occupancy hotel room: \$750

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. ____/____ Name on Card: ____ Billing Zip Code: _____	
Security code: _____ (Required) Please charge \$ _____ on this credit card now. _____	
<input type="checkbox"/> Charge \$950 deposit on the above card on Jan. 15, 2019 <input type="checkbox"/> Charge the whole balance on the above card on Mar 15, 2019	
<i>By signing this form, I agree to the terms and policy of the Acupuncture Course, China.</i>	
SIGNATURE: _____ DATE: _____	
How did you know of this course?	<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. Incomplete registration forms cannot be processed.



Equine Acupuncture Course, China Registration Form

STEP 1: Please check courses you have 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 Courses: <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)

Passport Name	(exactly as appears on passport)			Nickname	
Passport #		Title		License #	
Date of Birth		<input type="checkbox"/> Male <input type="checkbox"/> Female	Practice	<input type="checkbox"/> Small Animal <input type="checkbox"/> Equine <input type="checkbox"/> Other:	
Address (work)	Business Name:				
	Street Address:				
	City:	State:	Zip Code:	Country:	
Address (home)	Street Address:				
	City:				
	City:	State:	Zip Code:	Country:	
Telephone	Work:	Home:	Fax:		
Email	Public: _____ For Chi Institute Only (required): _____				
Food Preferences	<input type="checkbox"/> Vegetarian <input type="checkbox"/> Regular <input type="checkbox"/> Special requests (specify): _____				
Emergency Contact	Name:		Phone Number:		

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

Application Fee	Equine Acupuncture Course March 1 - May 12, 2019 online; May 13-16, 2019 on-site	
<input type="checkbox"/> Application Fee: \$100 (new student only, due with registration)	<input type="checkbox"/> Tuition: \$2,405 if a minimum \$950 deposit is paid before Jan. 15, 2019 and tuition paid in full before Mar. 15, 2019. <input type="checkbox"/> \$200 late fee applied if a minimum \$950 deposit is not paid before Jan. 15, 2019 and tuition paid in full before Mar. 15, 2019.	<i>Tuition covers instruction and handout; lunch during class; transportation to the classroom and lab, events and activities during the class.</i> <input type="checkbox"/> DOUBLE occupancy hotel room at a four-star Hotel from May 14-16, 2019 (checkout on May 17): \$500 <input type="checkbox"/> SINGLE occupancy hotel room: \$750

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. ____/____ Name on Card: _____ Billing Zip Code: _____ Security code: _____ (Required) Please charge \$_____ on this credit card now. <input type="checkbox"/> Charge \$950 deposit on the above card on Jan 15, 2019 <input type="checkbox"/> Charge the whole balance on the above card on Mar. 15, 2019	
<i>By signing this form, I agree to the terms and policy of the Acupuncture Course, China.</i>	
SIGNATURE: _____ DATE: _____	
How did you know of this course?	<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. Incomplete registration forms cannot be processed.