

Andrews University

Department of Physical Therapy
Postprofessional Program

Course Registration Form

Name: _____ Email: _____
Please provide for registration confirmation

Address: _____ City: _____ State: _____ Zip: _____

Home Telephone: _____ Work Telephone: _____

Please check your selection(s) in the below

DATE	INSTRUCTOR	COURSE	ACADEMIC *		CONTINUING EDUCATION		
			Course No.	Credits	Days	Units	Cost
Spring 2009							
<input type="checkbox"/> March 15-20	Pettman	NAIOMT Level III: Advanced Upper Quadrant	PTH546	3.0	6	4.8	\$885
<input type="checkbox"/> March 22-27	Pettman	NAIOMT Level IV: High Velocity Manipulation	PTH548	3.0	6	4.8	\$1000
<input type="checkbox"/> May 3-8	Berglund	NAIOMT Level II: Intermediate Lower Quadrant	PTH538	3.0	6	4.8	\$885
<input type="checkbox"/> May 17-22	Berglund	NAIOMT Level I: Intro to Fundamentals of Ortho/Manual Therapy	PTH536	3.0	6	4.8	\$885
Fall 2009							
<input type="checkbox"/> September 13-18	Pettman	NAIOMT Level III: Advanced Lower Quadrant	PTH547	3.0	6	4.8	\$885
<input type="checkbox"/> September 20-25	Pettman	NAIOMT Level IV: High Velocity Manipulation	PTH548	3.0	6	4.8	\$1000
<input type="checkbox"/> October 4-9	Berglund	NAIOMT Level II: Intermediate Upper Quadrant	PTH537	3.0	6	4.8	\$885
<input type="checkbox"/> October 25-30**	Berglund	NAIOMT Level I: Intro to Fundamentals of Ortho/Manual Therapy	PTH536	3.0	6	4.8	\$885
**This is a change from the original dates of Oct 18-23 because of an overlap with the AAOMPT Annual Conference							

DO YOU PLAN TO TAKE FOR ACADEMIC CREDIT or CEU CREDIT? Please check one:

- All course participants are required to submit a copy of their current physical therapy license with this registration form.
- A deposit of \$200 is necessary to hold a spot in a course. The balance is due no later than 21 days prior to the start of the course.
- Andrews University reserves the right to cancel a course up to 14 days prior to the course, with full refund, if insufficient numbers of participants have registered for the course.
- Registrants may cancel up to 21 days prior to the course and receive a full refund. After this time cancellations received 14 days prior to the course will receive a refund less \$100 for administrative costs. After this, no refunds will be given.

Method of Payment:

Check/Money Order: (Please make payable to **Andrews University**)
 Credit Card: Discover MasterCard Visa

Payment Amount \$ _____ US Dollars

** Academic credit is currently \$481 per credit. This is subject to change.*

Credit Card _____ CSV# _____ Cardholder's _____
 Number: _____ Exp Date: _____ Name: _____

Mail to: *Postprofessional Programs
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 Berrien Springs, MI 49104-0420*

Phone: 269-471-6305
Fax: 269-471-2866