



Continuing Education Registration 2008-2009

<u>2008</u>	<u>COURSE TITLE</u>	<u>NCBTMB CREDITS</u>	<u>DATES</u>	<u>COST</u>	<u>\$ENCL.</u>
<u>Sep-Nov</u>	Orthopedic & Medical Massage Certification 7 Seminar Series; Dr. Joel Schwartz, DC	56	Sep 27 & 28; Oct 11 & 12, 25&26; Nov 9, 2008	\$1,080	_____
<u>Sep</u>	Orthopedic Massage 1 Lower Extremity, Dr Joel Schwartz, DC	8	September 27, 2008 Sat: 9am-4:30pm	\$180	_____
	Call for supply List		May be taken as part of the Orthopedic & Medical Massage Certification		
<u>Sep</u>	Orthopedic Massage 2 Low Back, Pelvis & Abdomen, Dr Joel Schwartz, DC	8	September 28, 2008 Sun: 9am-4:30pm	\$180	_____
	Call for supply List		May be taken as part of the Orthopedic & Medical Massage Certification		
<u>Oct</u>	Healing Hot & Cold Stone Therapy Josephine Skiles, BS, MT **Class limited to 10, supply list to be sent**	16	October 4 & 5, 2008 Sat: 9am-5pm/Sun: 9am-5pm	\$300	_____
<u>Oct</u>	Orthopedic Massage 3 Neck, Mid-Back, Shoulder Girdle, Dr Joel Schwartz, DC	8	October 11, 2008 Sat: 9am-4:30pm	\$180	_____
	Call for supply List		May be taken as part of the Orthopedic & Medical Massage Certification		
<u>Oct</u>	Orthopedic Massage 4 Upper Extremity, Dr Joel Schwartz, DC	8	October 12, 2008 Sun: 9am-4:30pm	\$180	_____
	Call for supply List		May be taken as part of the Orthopedic & Medical Massage Certification		
<u>Oct</u>	Professional Ethics Renate Novak, CEO, MT	6	October 18, 2008 Sat: 10am-4pm	\$150	_____
<u>Oct</u>	Medical Massage 1 Gastrointestinal, Cardiovascular, Respiratory and Urinary Conditions, Dr Joel Schwartz, DC	8	October 25, 2008 Sat: 9am-4:30pm	\$180	_____
	Call for supply List		May be taken as part of the Orthopedic & Medical Massage Certification		



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<u>Oct</u>	Medical Massage 2 Musculoskeletal, Nervous and Endocrine Conditions, Dr Joel Schwartz, DC	8	October 26, 2008 Sun: 9am-4:30pm	\$180	_____
	Call for supply List		May be taken as part of the Orthopedic & Medical Massage Certification		
<u>Nov</u>	Insurance Billing, Documentation and Practice Development for the Medical and Orthopedic Massage Therapist Dr Joel Schwartz, DC	8	November 9, 2008 Sun: 9am-4:30pm	\$180	_____
	Call for supply List		May be taken as part of the Orthopedic & Medical Massage Certification		
	CALL FOR DATES/TIMES:	NeuroMuscular Therapy (60 hrs)	with Terry Rogers	\$1,200	
		Polarity Training (42 hrs)	with Joyce Johnson	\$840	
		Shiatsu Training (54 hrs)	with Dennis Ruckel	\$1,080	



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<u>Jan</u>	Aromatherapy/Raindrop Darby Lines, MT	6	January 16, 2009 Fri: 9:00am-4:00pm	\$120	_____
	Aromatherapy/Raindrop Darby Lines, MT	6	January 17, 2009 Sat: 9:00am-4:00pm	\$120	_____
<u>Feb</u>	Massage Law & Licensing Lisa DiStefano, NCTBM	6	February 8, 2009 Sun: 9:30am-4:30pm	\$120	_____
	Sports Massage Clare Caldwell, MT	6	February 22, 2009 Sun: 9:00am-4:00pm	\$120	_____
<u>Mar</u>	CPR/First Aid (Infants/Children/Adults) Dwayne Tazzetto, MT	8	March 7, 2009 Sat: 10am-5:30pm	\$75	_____
	CPR/First Aid (Infants/Children/Adults) Dwayne Tazzetto, MT	8	March 8, 2009 Sun: 10am-5:30pm	\$75	_____
	Professional Ethics Renate Novak, CEO, MT	6	March 29, 2009 Sun: 10am-4pm	\$150	_____
<u>Apr</u>	Hot & Cold Stone Therapy Josephine Skiles, BS, MT **Class limited to 10, supply list to be sent**	16	April 18-19, 2009 Sat: 9am-5pm/Sun: 9am-5pm	\$320	_____
<u>Oct</u>	Professional Ethics Renate Novak, CEO, MT	6	October 11, 2009 Sun: 10am-4pm	\$150	_____
<u>Nov</u>	Hot & Cold Stone Therapy Josephine Skiles, BS, MT **Class limited to 10, supply list to be sent**	16	November 7-8, 2009 Sat: 9am-5pm/Sun: 9am-5pm	\$320	_____



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Name: _____ Date: _____

Name to appear on Certificate (please print):

Address: _____ City: _____

Day Phone: _____ Eve phone: _____ Cell phone: _____

Workshop Title:	Dates:	Cost:
Total Amount Due:		

Method of Payment:	Account Number:	Expiration Date:	3-digit code (on back of card)
<input type="radio"/> Check	(payable to: Health Choices) ("Hot & Cold Stone" payable to: Josephine Skiles)	N/A	N/A
<input type="radio"/> Amex			(on front of card)
<input type="radio"/> Discover			
<input type="radio"/> MasterCard			
<input type="radio"/> Visa			

Health-Choices is approved by the National Certification Board for Therapeutic Massage and Bodywork (NCBTMB) as a continuing education provider. Courses and workshops at Heath-Choices may be used to fulfill re-certification requirements.

Registration:

Print out this registration form and send it in with your payment. Workshops must be paid in full 2 weeks prior to the scheduled start date. Registration forms must accompany payment in order to be processed. Payment or down payment secures a seat in the class.

Cancellations:

If you need to cancel your enrollment in any class, you need to do so fourteen (14) days prior to the start of the class. Cancellations for emergencies or illness will require documentation if less than seven (7) days notice is provided.

Refund Policy:

Cancellations must be made within seven (7) days of the start of your class, or 50% of paid tuition is forfeited to Health-Choices. Class size is limited; deposits hold your space in the class. Determinations that a class will take place are contingent upon enrollment and are assessed one week (7 days) prior to the class's commencement date. If 24 hours (or less) notice of cancellation is provided, 100% forfeiture of paid tuition applies. If Health-Choices has to cancel a class for any reason, 100% of paid tuition will either be refunded or credited toward another class.

I hereby acknowledge that I have read the policies stated above: