



## Registration Form

### Mobilization of Visceral Fascia for the Treatment of Pelvic Dysfunction Course II: The Reproductive System

Print Name \_\_\_\_\_ Degree for Certificate \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Day Tel. (     ) \_\_\_\_\_ Fax (     ) \_\_\_\_\_

Cell Phone (     ) \_\_\_\_\_

\*E-Mail (required) \_\_\_\_\_

#### Registration fees/Early registration:

\_\_\_\_\_ I am registering for the New York, NY Course October 1-3, 2010  
Cost is \$625.00

\_\_\_\_\_ I am a PT student eligible for a 10% discount on my registration  
Cost is \$562.50  
Space limited register early!

#### Payment Options

Check - Make checks payable to Herman & Wallace, Inc and mail to:  
Herman & Wallace Inc, P.O. Box 78029, Belmont, MA 02478

Visa or MasterCard (circle one) Credit Card # \_\_\_\_\_

3-digit V code on back \_\_\_\_\_ Expiration Date \_\_\_\_\_ Amount \_\_\_\_\_

Print Cardholder's

Name \_\_\_\_\_

Cardholder's

Signature \_\_\_\_\_

Cardholder's

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

(as it appears on credit card statement – if different from above)

Refunds (minus \$75.00) will be given if the cancellation request is received 10 days prior to the course date. If the course is cancelled, a full refund will be given. Herman & Wallace Pelvic Rehabilitation Institute is not responsible for any adverse events relating to hotel, travel, weather or accommodations issues that may arise.

All participants will be required to sign a Release of Liability prior to the commencing of this course.

**\*Confirmation for registration will be given via e-mail and mail**

To fax registration toll free to 1(866) 745-1318  
For questions, e-mail admin@pelvicrehab.com