



Small Animal / Equine Acupuncture Program Registration Instruction

Prerequisites:

1. Licensed Veterinarian.
2. To all new students of Chi Institute, a **one-time non-refundable 100€ application fee** is required for application process and student file. The registration will not be processed without the application fee.

Step-by-Step Instructions on the Registration Form:

Step 1. Check which Veterinary Acupuncture Classes you have previously attended.

Step 2. Fill out contact information.

Step 3. Select the registration time-bracket(s) for Select the Session(s) you wish to participate in. It is required to start from Session 1 if you don't have any veterinary acupuncture training background. The full payment for the tuition of each session must be received or postmarked by 15 days before the beginning of corresponding session. A €50 late fee will be charged if the payment is sent within 1-15 days before the beginning of corresponding session. An additional €100 onsite registration fee will be charged if the student waits to pay the tuition on site.

Step 4. Select the Method of Payment.

Step 5. If you are the new student of Chi Institute, please attach a brief biographical sketch explaining your type of work and your motivation for attending our program. Please indicate any previous exposure or experience with Traditional Chinese Medicine including acupuncture or Chinese herbals. Please also attach a recent photograph of yourself. Please note a one-time **100€ application fee** is required for application process and student file. Your registration is not completed until registration form, photo and bio are received

Step 6. 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.

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.

- More than 60 days prior to class date = 100% refund
- 59 to 30 days prior to class date = 90% refund
- 29 to 15 days prior to class date = 80% refund
- 14 days prior to class date - No shows = No refund / No transfer

Transfer Policy:

If a student wants to transfer from an already paid session to another (it is also allowed to transfer to the session of Mixed Practice Veterinary Acupuncture program), no fee will be charged if the student notifies Chi Institute 14 days before the beginning of the corresponding session or earlier. However, it is the student's responsibility to pay the tuition difference if there is any. A 10% reschedule/transfer fee will be charged if the student notifies Chi Institute within 1 to 13 days before the beginning of the corresponding session. The payment for all rescheduled or transferred sessions can't be refunded later.

Discount Policy:

The 30% discount applies if a student completes all sessions of the Chi Institute Small Animal Acupuncture and wishes to repeat a session. If you fall in this category, please mark the 30% discount checkbox at the bottom of the table of step 4 of registration form and fill the "Grand Total Due" with the amount after discount.



Small Animal / Equine Acupuncture Program Registration Form

STEP 1: Check courses previously attended. If none, check appropriate box.

Veterinary Acupuncture: <input type="checkbox"/> Small Animal <input type="checkbox"/> Equine <input type="checkbox"/> Mixed <input type="checkbox"/> None	Where: _____ When: _____
TCVM Clinical Approach / Herbology: <input type="checkbox"/> HT/LU <input type="checkbox"/> SP/ST <input type="checkbox"/> Liver/Endo <input type="checkbox"/> Kid/Geri <input type="checkbox"/> Derma/Immu	
Advanced Programs: <input type="checkbox"/> Certified Veterinary Tui-na <input type="checkbox"/> TCVM Annual Conference <input type="checkbox"/> Tongue/Pulse Diagnosis & Classical Points	

STEP 2: Contact Information/Preferred Mailing Address. Print or type all information clearly.

NAME	First Name:	Middle Name:	Last Name:
TITLE		NICKNAME	LICENSE N°
BUSINESS			
ADDRESS (W)	Street Address:		
	Province:	Post/ Zip Code:	Country:
ADDRESS (H)	Street Address:		
	Province:	Post/Zip Code:	Country:
TELEPHONE	Work:	Home:	Fax:
EMAIL	Public: _____ For Chi Institute only: _____		

STEP 3: Select the Registration Time-Bracket(s) for the session(s) you wish to participate in.

Session1 October 7 -10, 2010	Session2 Dec 2-5 , 2010	Session3 Feb 24-27, 2011	Session4 June 1 to June 5, 2011	Fees
<input type="checkbox"/> € 925 paid before Sept 7, 2010 <input type="checkbox"/> € 1000 paid during Sept 8 to Oct 6 , 2010	<input type="checkbox"/> € 925 paid before November 1, 2010 <input type="checkbox"/> € 1000 paid during Nov 2 to Dec 1 , 2010	<input type="checkbox"/> € 925 paid before January 23, 2011 <input type="checkbox"/> € 1000 paid during Jan 24 to Feb23, 2011	<input type="checkbox"/> € 925 paid before May 1 , 2011 <input type="checkbox"/> € 1000 paid during May 2 to May 31, 2011	<input type="checkbox"/> € 100 (Application fee) <input type="checkbox"/> € 300 (Fees for Final Exam and Case report review, which are two of requirements of the Chi certified acupuncturist certificate. Certificate issuing included.)

STEP 4: Method of Payment and Answer the Question

<p>Unic Method of Payment is bank transfer. Mail, email and fax (if possible) the bank transfer receipt .Please indicate name of student and concept of transfer.(Session number and fees)</p>	
C.A.M. (Caja de ahorros del Mediterráneo) CCC: 2090.3014.36.0040326110	
How did you know this program?	<input type="checkbox"/> Friends _____ <input type="checkbox"/> Seminar _____ <input type="checkbox"/> Magazine _____ <input type="checkbox"/> Internet _____ <input type="checkbox"/> Flyer _____ <input type="checkbox"/> Email _____ <input type="checkbox"/> Other _____

STEP 5: If this is the first time you register courses with us, please attach a brief biographical sketch and a recent photograph of yourself. A non-refundable 100€ application fee is required for all new students.

STEP 6: 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.

Biographical Sheet to Accompany Registration for Student File
(required for all new students. Previous students please update if appropriate)

Name: _____

Title: _____

I graduated from _____ Veterinary School
in 19____ 200____

I have have not previously studied Acupuncture.

I have have not previously studied Chinese herbs.

Previous Background, if applicable:

My current practice specializes in:

I work on Small Animals Y N Equine Y N Exotics Y N Other: _____

My goals in studying TCVM are:

Some personal information about me and my interests:

Signed: _____ Date _____

(Use reverse side if more room is needed)