



Global Physics Solutions

Radiation Oncology Nurses Training Registration Form

Name _____

Title _____ Position _____

Years Experience / Oncology? _____ Radiation Oncology? _____

Home Address _____

Home Phone _____ Cell Phone _____

Work Address _____

Work Phone _____

Email Address _____

Please indicate which Course Date you are interested in.

August 14-15, 2010

South Bend, IN – University of Notre Dame

December 11-12, 2010

Orlando, FL – Hilton Walt Disney World

Registration Fee Payment

Early Bird Registration Fee: \$485 (Does not include hotel stay)

**If registration received at least 30 days prior to course*

Regular Registration Fee: \$750 (Does not include hotel stay)

**If registration received less than 30 days prior to course*

Fee includes: Course Material
 Breakfast
 Lunch

_____ : Money Order

_____ : Checks (Global Physics Solutions)

_____ : Credit Card (Circle which card)
 Visa / MasterCard / Discover / American Express

Credit card number: _____

Expiration date: _____

Amount to be charged: _____

Signature

50% of Registration Fee will be reimbursed to student if they are unable to attend the course they have registered for.

Attendee Signature

Date