



VIRGINIA REGISTRATION FORM KDT TECHNIQUE CERTIFICATION COURSE

RETURN BY FAX ASAP: (814) 754-5137

Sat. June 13 & Sun. June 14, 2020

**Optional Friday Evening Symposium Portion - FREE with registration*

YES! I would like to attend or re-attend

**RSVP by
June 1st**

LOCATION: HILTON NORFOLK THE MAIN

100 East Main Street, Norfolk, VA 23510 PH: 757-763-6200

Mention ChiroSymposium/Breakthrough Coaching when reserving your room

ChiroSymposium

TIME: Sat. 9:00am - 5:00pm ~ Sun. 8:00am - 12:00pm

Clinic Name: _____

Doctor's Name: _____ License #: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: () _____ Fax: () _____

E-Mail: _____

**(Re-attending fee is \$49
complete reverse side)**

**This KDT Class is the second portion of
the KDT Decompression Certification.
You must be a registered user of KDT and
completed the online portion prior to
attending the seminar. You must
complete both portions to receive your
KDT Certification.
(one healthcare professional per user license)**

**To Register a Chiropractic Assistant
Please complete the reverse side.**

**Chiropractic Assistant
Fee \$99 each**

(CAN NOT BE A LICENSED HEALTHCARE PROFESSIONAL)

***** NO CE FOR THIS SEMINAR *****

Cancellation Policy:

**** Due to hotel food and beverage requirements, registrants will incur a \$75 per individual cancellation fee without notification a minimum of two weeks prior to the event; Registrants that do not show up for the seminar (no show) will incur a \$75 per individual cancellation fee. Cancellation MUST be in writing. All cancellations after deadline prior to the Seminar and no shows are liable for the entire fee. The KDT Certification Technique & Mircom Products, LLC makes every attempt to offer programs as publicized. We nevertheless reserve the right to alter and/or adjust program details, including but not limited to dates, locations, times, instructors, and presentation sources and sequences. You are encouraged, therefore, to contact Mircom Products, LLC to confirm program details prior to attending the sessions. KDT & Mircom Products, LLC are not responsible for expenses and/or consequential damages suffered by registrants of altered programs. *For further information please call MirCom Products at 814-754-1081. *For those who cancel after the deadline or do not show will not be refunded. *Seminar Fee cannot be credited to a future seminar.**

Technique Course is not table specific. It doesn't matter what type of decompression traction table you utilize. I.e. Dynatronics, Lloyd, Vax D, Chattanooga, etc. Again, the technique course is not table specific. If you have questions please call 1-814-754-1081.

You are responsible for your own travel arrangements to and from seminar location.



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ChiroSymposium

June 13-14, 2020

CHARGES SELECTION (Please initial all options that apply)

SEMINAR / CLASS 2nd Portion.....\$1499*/ doctor
DOCTOR NAME : _____

*** Do you own a KDT Table or have a KDT Seminar Credit? Yes or No. Please circle one.**

RE-ATTEND CLASS.....\$49 / attendee
NAME RE-ATTENDING: _____ (No Certificate)

CHIROPRACTIC ASSISTANT.....\$99 / attendee
(can not be a licensed healthcare professional)

NAME OF CHIROPRACTIC ASSISTANT: _____
NAME OF CHIROPRACTIC ASSISTANT: _____

CREDIT CARD INFORMATION (MUST PROVIDE A CREDIT CARD) * See Cancellation Policy*

NAME (As it appears on the card): _____
BILLING ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE#: _____
CARD# (MC/VISA/DISC/AMEX) _____
EXP: _____ / _____ SECURITY CODE: _____

PAYMENT AUTHORIZATION I authorize Mircom Products, LLC KDT Decompression Systems & Technique to charge my credit card for payment for the above listed charges.

CARDHOLDER'S SIGNATURE DATE

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