



KDT NEURAL FLEX

HANDS ON WORKSHOP

Saturday, March 4, 2023

*** KDT TABLE OWNERS ONLY**



ONE DAY!

To Register Complete the reverse side.

\$99 / attendee

LOCATION: **KDT LEARNING CENTER**

299 Main Street - Central City, PA 15926 Ph: 814-754-1081

**RSVP by
Feb. 24th**

TIME: **Sat. 9:00am - 3:00pm (ONE DAY)**

**Limited Seating*

Clinic Name: _____ KDT Table Owner: Yes / No

Doctor's Name: _____ License #: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: () _____ Fax: () _____

E-Mail: _____

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.



REGISTER TODAY! LIMITED SEATING!

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Saturday, March 4, 2023 9:00am-3:00pm

\$99 / attendee x _____ = Total \$: _____

NAME: _____

NAME: _____

NAME: _____

NAME: _____

NAME: _____

NAME: _____



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

RETURN BY FAX ASAP: (814) 754-5137