PHYSICS ONLY WEEKEND ENROLLMENT FORM

| l ate and | on-site | registration | s subject to | a \$50 late fee. |
|-----------|------------|--------------|--------------|------------------|
| Late and | i Oll-Site | redistration | S SUDJECT TO | a bou late lee. |

| Name | | | JMr. □∧ | ∕ls. □Miss | □Mrs. | □ Dr |
|---------------------|--------------|---------|---------|------------|-------|------|
| Credentials: □ RDMS | □RDCS □RVT □ | RVS RCS | □RT □Rì | N □PA □M | D DO | □DC |
| Birthday | ARDMS# | ± C | CI# | SDM | S# | |
| Address | | | | | | |
| City | | State _ | | Zip code | | |
| Phone | E | Email | | | | |

SELECT SEMINAR LOCATION

LOCATIONS

DATE

■ Los Angeles, CA

April 13 - 14

□ Los Angeles, CA

October 19 - 20

TUITION

| Afternoon Courses | Sonographer | Physician |
|--------------------------|-------------|-----------|
| Ultrasound Physics - SPI | \$325 | \$425 |

Registration tuition includes course materials, continental breakfasts and beverage breaks.

Payment Method

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|--|-----------------------------|
| $\hfill \Box$ Check/Money order (enclosed) or charge my: | □MasterCard □Visa □Discover |
| Card No. | Exp Date |
| Signature | 3-Digit Code |

4 WAYS TO REGISTER

- 1) ONLINE www.esp-inc.com
- 2) EMAIL ATTACHMENT info@esp-inc.com
- 3) FAX: (281) 292-9430
- 4) MAIL ESP Ultrasound · PO Box 7439 · Woodlands, Texas 77387-7439 Personal checks payable to ESP Ultrasound must arrive 4 weeks prior to seminar.