

REGISTRATION FORM

PLEASE REGISTER ME FOR THE FOLLOWING COURSES:

GAIT & FOOT FUNCTION SEMINAR (\$99)

- Saturday - Sunday** **Orlando, FL**
November 7-8, 2009
Register by September 23

LIVE F-SCAN TRAINING SESSION (FREE)

- Friday, October 16, 2009** **Tekscan / Boston, MA**
Register by September 18
- Friday, December 11, 2009** **Tekscan / Boston, MA**
Register by November 19

Name : _____

Title : _____

Company/University : _____

Address : _____

City/State/Zip : _____

Phone : _____ Email : _____

Registration Fee (for Gait & Foot Function Seminar only): \$99

(Cancellation - Fee is refundable if cancellation received within 30 days of seminar)

Credit Card Payment (please circle):

MC Visa AMEX

CC# : _____ Expiration Date : _____

RETURN YOUR REGISTRATION BY:

- Fax: 617.464.4266
- Email: cnovak@tekscan.com
- Mail: 307 West First Street
South Boston, MA 02127
- Phone: 617.464.4500 x344

