

## ULTRASOUND imaging for REHABILITATION of the LUMBO- PELVIC REGION: a CLINICAL approach

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with **Jackie Whittaker**, *BscPT, FCAMT, CGIMS, CAFCI, PhD Candidate,*  
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**March 28-29, 2008 ~ 8:00 - 5:00 (15 Contact Hours)**  
**Hosted by Core Therapeutics PT, Bellingham, WA**

Name: \_\_\_\_\_  
*Last First Middle*

Mailing Address: \_\_\_\_\_  
*Street/PO Box Suite #*

City \_\_\_\_\_ State \_\_\_\_\_ Zipcode \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_

Clinic Name/Address: \_\_\_\_\_

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Exp date: \_\_\_\_\_ / \_\_\_\_\_ VIN No. \_\_\_\_\_ Zip code for billing address: \_\_\_\_\_

**Course Fee: \$500.00 Registration Deadline: February 14, 2008**  
**FAX TO: 360.752.0271**

**Suggested Accommodations:** The Chrysalis: One of the premier destination hotels in the NW, and a scenic walk from Core PT. [www.chrysalisinnandspa.com](http://www.chrysalisinnandspa.com), 360.756.1005

**Cancellation Policy:** Core Therapeutics PT reserves the right to cancel the course in case of circumstances beyond our control. Participants may cancel by Feb. 14, 2008 and receive full refund. Cancellation after Feb. 14, 2008 will result in a 50% refund. Your signature below notes that you understand the cancellation policy.

\_\_\_\_\_  
*Signature Date*