

## General Information

### Dates/Times

Wednesday, July 8 - Saturday, July 11 - Program starts at 8:30 a.m.  
 On Wednesday, July 8, Check-in starts at 8:00. Course adjourns daily 4:30  
 (3:30 on Saturday). Enrollment is limited to the first 48 processed applications.  
 Confirmation letters will verify enrollment and give additional details.

### Fees

Regular enrollment fee is \$675 per person. **Past registrants, graduates of MU, and/or clinicians who work in settings which have a contractual agreement with MU to provide clinical education may enroll for \$615.** Fee includes all breaks, lunches and the Friday evening dinner at one of Milwaukee's fine restaurants. Fee also covers all course materials including handouts, use of dissection tools, aprons, cadaver, and anatomy and dissection texts.

**Please bring clothes and shoes appropriate for dissection.**

### Accommodations

Housing on the MU campus is available for a reasonable fee. Please note: these are very basic residence hall accommodations. You may call 414-288-7208 for more information or reservations. A list of nearby hotels will be sent when we receive your registration.

### Location/Parking

Morning lectures will be held in room 356 of the Walter Schroeder Health Sciences & Education Complex. Afternoon sessions will be held in the Dissection Laboratory. Parking is available at the cost of \$5/day in parking structure #1. The entrance is located on 16th Street just north of Wisconsin Avenue. Please call Parking Services at 414-288-6911 for additional parking information.

### Credits

Continuing Education Units (CEU) will be awarded for successful completion of this course. This course is approved by the NATA Board of Certification, Inc. Approval is pending for WPTA and WOTA credits.

### Substitutions/Refunds/Cancellations

If you cannot attend, you may call to substitute another person. If you must withdraw, a full refund (minus a \$15 administrative fee) will be issued if you do so at least 5 full working days before the first meeting of the course. No refunds will be given after the course has begun. MU reserves the right to cancel the course provided a 30 day notice is given prior to July 8, 2009. In case of cancellation, a full refund will be given to enrolled participants.

### **To Register**



**By Mail:** Send or deliver your completed enrollment form with payment to Marquette University,

College of Health Science-Coordinator of Continuing Education, P.O. Box 1881, Milwaukee, WI 53201-1881.

**By Phone:** Use MasterCard or Visa credit card and call 414-288-3093.



**By Fax:** Fax your registration with your credit card number to 414-288-8354. Our FAX line is open 24 hours a day, seven days a week.

**By E-mail:** Send via Internet your registration information with your credit card number to: carol.trecek@marquette.edu.



**Registrations with out payment, check or credit card number will not be processed.**

**In Person:** Accepted at the College of Health Sciences, Schroeder Complex, Room 244.

**For more information, Call 414-288-3093, Fax 414-288-8354.**

**Enrollment Form** Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

**PLEASE Print -**  
 Payment must accompany registration.  
 Thank you!

Course Title	Number	Fee
<b>Gross Dissection of the Upper Extremity</b>	UE-09	

Do you qualify for a discount?  Yes  No  
 Year Graduated from M.U. \_\_\_\_\_

Employer \_\_\_\_\_

Position \_\_\_\_\_ Department \_\_\_\_\_

Employer Street Address \_\_\_\_\_ Room/Suite \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Fax \_\_\_\_\_ E-mail address \_\_\_\_\_

Home Street Address \_\_\_\_\_ Apt No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Method of Payment	
Please Note: Payment must accompany registration.	
_____ Check	Number _____
_____ Master Card	
_____ Visa	
Credit Card Number _____	
Expiration Date _____	Office Use Only _____
Signature _____	



**Make Checks Payable to: Marquette University and return to:**

Marquette University, College of Health Sciences - Coordinator of Continuing Education, P.O. Box 1881, Milwaukee, WI 53201-1881. Telephone 414-288-3093. FAX 414-288-8354.