Registration Form
1:00 PM – 4:00 PM, Room MET 111
Register by March 31st. Please type or print legibly
Institutional information as it will appear in the directory:

Organization __________________________________________
Address _______________________________________________
City ___________________ State _________ Zip Code ________
Phone _______________ Fax _____________________________
Contact Name _____________________________
Email _____________________________________________

Names of Representatives Attending
1. ___________________________________________________
2. ___________________________________________________

Early Bird Registration Fee – through March 3rd - $200
Registration Fee – After March 3rd - $300

“Tuesday Afternoon of CCU’s Sponsorship
Opportunity:
Silver – $25
Gold – $50
(See flyer for details)

Registration Fee includes:
One Booth, Two Chairs, and Lunch for Two

Cancellation Policy:
Cancellations occurring on or before March 17th will receive a full refund of the registration payment.
Cancellations after March 17th will not be refunded.

Make Checks Payable to “UNTHSC Physical Therapy”
& mail to:
Sara Correa
Department of Physical Therapy
University of North Texas Health Science Center
3500 Camp Bowie Blvd., MET 555A
Ft. Worth, TX 76107

Questions?
Contact: Sara Correa by phone: 817-735-0146 or email:
sara.correa@unthsc.edu