



MGC DIAGNOSTICS®

# Cardiorespiratory Diagnostics 2019 SPRING SERIES Seminar Registration Form March 4-6, 2019

**Tuition:** **\$825** (if registered before Jan. 4, 2019 )  
**\$875** (if registered between Jan. 4 & Feb. 4, 2019)  
**\$950** (if registered after Feb. 4, 2019)

**Includes:** electronic course syllabus, agenda with notepad, MGC Diagnostics tote bag, breakfast, breaks and lunch.

Please print or type your information into this form to ensure correct spelling on your certificate of course completion.

Name:

Credentials:  AARC Member #:

Facility:

Address:

City / State / Zip:

Phone:  Fax:

Email:  Referred by:

City/State to be Listed on Name Badge:

**Payment may be made by check, money order, Visa, or MasterCard.**

Pricing (see above) is based on date this registration form is received, not dated.

My check for \$  made payable to **MGC Diagnostics Corporation** is enclosed.

Please charge \$  to my credit card.  MasterCard  Visa

Card #:

CVV number (from the back of card):  Expiration date:

Today's date:  Print Cardholder Name:

Cardholder Signature:

Billing Address:

City, State (Province):

ZIP Code:

Please return this registration form with your tuition payment to:

Attn: Courtney Beaton  
email: [seminar@mgcdiagnostics.com](mailto:seminar@mgcdiagnostics.com)  
or  
private fax: (651) 379-8244

**MGC Diagnostics Corporation**  
Educational Programs  
350 Oak Grove Parkway  
St. Paul, MN 55127-8599

For MGC Personnel  
Use Only

Date Form Received:

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For additional information, contact Courtney Beaton at (800) 950-5597