

The Network Spinal Analysis Practice Basic Care Intensive

March 12th - 14th, 2010 Melbourne, Australia with Dr. Steven Katz

Program Information

Registration

6 pm, Friday, March 12th . The seminar will start promptly at 7 pm.
Scheduled to end Sunday at 2 pm.

All care will be taken to run on time; however, due to the nature of the program,
its conclusion time is subject to change.

Program Location

Diskin Life

181 Victoria Parade Fitzroy - Melbourne, VIC 3065 Australia

Ph: (03) 9417 7222 Fax: (03) 9416 3983

Local Accomodations

- Metropole, 44-48 Brunswick St.

Fitzroy. Ph 61 3 94118100

- City Edge Serviced Apartments 92 Albert St.

East Melbourne. Ph 61 3 94193433

- Albert Heights Serviced Apartments 83 Albert St.
East Melbourne Ph-(within Australia) 1800 800117

Your Investment

19 hours
CPD credits
applied for

Seminar Investment:

Early Bird rates* before 1st of March

First time D.C. **= \$545 AUD (inc GST)

Refresher D.C. = \$445 AUD (inc GST)

First time student = \$250 AUD (inc GST)

Add \$55 after the 1st of March

*Add \$55 after the 1st of March

**First time D.C. category may subtract \$50. if
you have attended the Developing the
Lifetime Wellness or Reorganisational Healing
Seminar

Recommended for: Chiropractors and Chiropractic students. It is suggested that Chiropractic students have completed the first year of school prior to attending a Basic Level Intensive Seminar. Please arrange your flight schedule to attend entire program.

Registration Form



24 Hour **SECURE** Registration Online
www.wiseworldseminars.com/bciau

Name _____

Address _____

City _____ State _____ PC _____ Country _____

Office Ph: _____ Mobile Ph: _____ Fax: _____

Email _____

I am a Chiropractor Chiropractic Student in my _____ year

This is my _____ time attending this seminar.

(I am) or (will be) a Graduate of _____ Chiropractic College in the year _____

Yes, I will bring _____ portable adjusting tables with me to the seminar.

I will make a Direct Deposit into Wise World Seminars Australasia acct.# BSB 063143 ACCT# 10357218
Ref _____

My check # _____ for \$ _____ is enclosed Payable to Wise World Seminars (Australasia) Pty Ltd.

Please charge my tuition \$ _____ to my Visa Mastercard Bankcard

Card# _____ / _____ / _____ / _____

Exp _____ Signature: _____

Mail or Fax completed registration form to:

Wise World Seminars (Australasia) Pty Ltd PO Box 372 West Burleigh QLD 4219 Fax +61 7 3319 6072

Please contact us for bank account details if you would like to do a direct credit for payment.