

**Chiropractic Society of Wisconsin**  
**Initial Certification Courses (NO CE)**

Sheraton Milwaukee Brookfield Hotel, 375 S. Moorland Road, Brookfield, WI 53005

Saturday, April 10 – Sunday, April 11, 2021

**If overnight accommodations are needed, call the Sheraton at (262)364-1100 to reserve your room. Mention the "CSW" to get our reduced rate of \$89.**

\*\$20.00 late fee added per individually selected class for registration after Tuesday, April 2, 2021. There will be a \$40 late fee added for the Package option.

<u>Saturday, April 10, 2021</u>	<u>Time</u>	<u>Price</u>	<u>Mark 'X' to enroll</u>
Chiropractic Technician Fundamentals (12 hours total) (now includes overview, patient history and vital signs) (Bring stethoscope and phymomanometer to class)	8:00 am – 8:00 pm	Member: \$99 Non-Member: \$129	_____
<b><u>Sunday, April 11, 2021</u></b>			
Electric Stimulating Currents** (Bring a set of electrodes to class)	8:00 am – 11:00 am	Member: \$59 Non-Member: \$79	_____
Ultrasound**	11:30 am – 2:30 pm	Member: \$59 Non-Member: \$79	_____
Light Therapy**	2:30 pm – 5:30 pm	Member: \$59 Non-Member: \$79	_____
Thermotherapy/Cryotherapy**	5:30 pm – 6:30 pm	Member: \$20 Non-Member: \$29	_____
<b><u>Full 2 Day Package:</u></b> includes all courses	Saturday - Sunday	Member: \$249 Non-Member: \$349 *\$40 late fee	_____

\*\*Course requires Chiropractic Technician Fundamentals as a prerequisite. Enrollment or prior completion of Chiropractic Technician Fundamentals is required for certification in modalities.

Registration Information – One registrant per page **Total = \$ \_\_\_\_\_**

Registrant: \_\_\_\_\_ Chiropractor (Employer) \_\_\_\_\_

Chiropractor: CSW Member? \_\_\_\_\_yes \_\_\_\_\_ no

Billing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Payment: Credit (below) or check made out to "Chiropractic Society of WI" send to CSW, PO Box 259506, Madison, WI 53725 to arrive by Tuesday, April 2, 2021.

Select: \_\_ MC \_\_ Visa \_\_ Amex Card number: \_\_\_\_\_ Exp: \_\_\_\_\_ CVV: \_\_\_\_\_

Name as it appears on the card: \_\_\_\_\_

Fax to the Chiropractic Society of Wisconsin at 608-824-2205. Call the CSW at 608-609-6383 for more information.