

Street Address	
City	State Zip/Postal Code
Phone	
Practitioner	Student
Practitioner License #	
Licensing State	

2010 Seminar Program Schedule:		
SHL 1 (Mar 6, 7):The Zhang Zhongjing Herb and FormuSHL 2 (Apr 10, 11):The Zhang Zhongjing Herb and FormuSHL 3 (May 1, 2):Shanghan Lun Pathophysiology and BSHL 4 (Jun 5, 6):Shanghan Lun Pulse Diagnosis*SHL 5 (Jul 24, 25):Shanghan Lun Abdominal DiagnosisSHL 6 (Sept 11, 12):Shanghan Lun Formula FamiliesSHL 7 (Oct 2, 3):Shanghan Lun Formula Modification SSHL 8 (Dec 11, 12):Shanghan Lun Case Studies	la Archetypes: The Ou asic Patterns	uter Circle
Full Program Pricing:	Practitioners	Students
Payment in Full:	\$1800	\$1600
 Monthly Installments (Autopay): Full Program Early Bird Registration: \$100 discount** 	\$240/month	\$210/month
Seminar Package Pricing:		
Please note: package pricing is only available for payment in full Package #1. SHL 1 and SHL 2:	Practitioners \$500	Students \$450
Package #2. SHL 3 and SHL 4:	\$500	\$450
Package #3. SHL 1 through SHL 4:	\$900	\$900
Individual Seminar Pricing:	New Registrants \$275	ICEAM Alumn \$175
SHL 6: Formula Families	\$275	\$175
SHL 7: Formula Modification System + Acupuncture	\$275	\$175
SHL 8: Case Studies	\$275	\$175

** When registering before January 15, 2010. Only available for those registering for the full program schedule.



Portland Institute of Classics in East Asian Medicine 波寶萬東臺灣古麗珊究所

LOCATION		CEU C	REDIT	
Lewis and Clark Albany Room 20			Program approved NCCAOM CEU's	for 112
PAYMENT				
Check/Money Orde	r is enclosed for full paymen	t (please make	checks payable to 'IC	CEAM')
Mail payment:	ICEAM			
	C/o Arnaud Versluys			
	2335 NW Raleigh Street, S	te 123		
	Portland, OR 97210			
	credit card (VISA and Master	• •		
Expiration Date	9	VIN Code	(on back of card)	
Name on Card				
Billing Address	(if different from above)			
Street				

City	State	Zip/Postal Code
•		•

CANCELLATION & REFUNDS

For all seminars the following applies:

100% refund
50% refund
No refund

PLEASE SIGN

By entering your credit card information and signing below, you authorize ICEAM to charge your card for the total amount aforementioned. The payment will be processed after January 15, 2010.

With your signature, you authorize the abovementioned parties to charge your credit card even if you are not able to attend the seminar for whatever reason. A good faith effort to get you audio recordings of the missed seminars will be provided if you miss it for reasons beyond your control.

Signed	Date
Print	_