

# "A Team Approach to Knee Rehabilitation"

- Presented by Shelbourne Knee Center at IU Health Methodist Hospital
- Friday, April 27, 2012
- 8am to 5:30pm
- Methodist Hospital Conference Center

**Please mail or fax this form with your payment to:**

Shelbourne Knee Center  
Attn: Heather Freeman  
1815 N Capitol Ave, Suite 600  
Indianapolis, IN 46202

Fax: 317.921.0230

Phone: 317.624.8417

**Limited Seats!**

**Register Today!**

PT    PTA    ATC    MD    PA    Other:\_\_\_\_\_

First Name:\_\_\_\_\_ Last Name:\_\_\_\_\_

Hospital or Practice Name:\_\_\_\_\_

Address:\_\_\_\_\_ Home Work

City:\_\_\_\_\_ State:\_\_\_\_\_ Zip Code:\_\_\_\_\_

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

Payment:

Registrations received by April 6

Registrations received after April 6

Professional

\$200

\$225

Full-Time Student\*

\$150

\$175

\*Students please include a copy of your student ID with your registration

Check enclosed (payable to: Shelbourne Knee Center)

VISA

MasterCard

Discover

American Express

Cardholder's Name:\_\_\_\_\_

As it appears on the card

Card Number:\_\_\_\_\_ Exp Date:\_\_\_\_\_

Signature:\_\_\_\_\_

**Once we have received and processed your registration and payment, we will send a letter confirming your registration.**

**For Office Use Only:**

Registration Received on \_\_\_\_\_ Date Processed/Check# \_\_\_\_\_ Confirmation Sent \_\_\_\_\_