

**Perfusion Technology Review (PTR) Registration Form**

Register for our Perfusion Technology Review by completing this form then returning to: holtdw@gmail.com .

 Today’s Date:

 First Name:       Middle Initial:       Last Name:

 Billing Street Address:

 City:

 State:

 Zip:       (**used by your credit card company**)

 Preferred Phone:

 Preferred E-mail address:

Year graduated Perfusion School:      Your Perfusion School?

Have you taken the ABCP exam?

 Current Place of Employment:

Type of Credit Card: [ ]  Visa [ ]  MC [ ]  Discover [ ]  PayPal (we will invoice upon submission)

 CC#:

 3 digit#:
 Expiration:

Perfusion Technology Review (PTR): **fee $999.00** includes:

* (**portal** **access until April 30, 2025 and then WILL EXPIRE**)
* the LIVE 2-hour webinars as scheduled on [www.hemetech.com](http://www.hemetech.com)
* the immediate previous Perfusion Technology Review recordings and extra materials for each of those presentations
* the practice examinations, practice quizzes and “hints for takers”
* borrow copies of textbook and video material for your single use only
* previous review content from which I have co-authored and participated
* study flashcards with more than practice 12,500 test questions from preferred perfusion info sources

**REFUND POLICY: NO REFUNDS WILL BE ISSUED. In the event you are unable to attend your registered session, you will be granted an equal dollar figure credit to ANY Hemetech CEU event up to TWO YEARS forward of the “Today’s Date.”**

|  |  |
| --- | --- |
| [ ]  | By checking this box, you acknowledge and accept the refund policy and authorize Hemetech, Inc. to charge your account the total amount due. |
| [ ]  | By checking this box, you acknowledge and accept that this is a self-driven program with only live activity as scheduled on <https://www.hemetech.com> . |
| [ ]  | By checking this box, you acknowledge PTR material is to be EXCLUSIVELY for your advancement of perfusion knowledge and not to be used for presentation to any other audience in any other capacity. |
| [ ]  | By checking this box, you acknowledge and accept access to the site as monitored and unauthorized access is prohibited. A single access is granted ONLY for the individual registering for the program. 1. A receipt and confirmation will be sent to you via e-mail after successful payment processing.
2. Access to portal will be offered within 24 hours of receipt and confirmation.
 |

For questions or concerns, please contact:

David W. Holt, MA, CCT:

holtdw@gmail.com

mobile: (614) 406-2893, or text

Hemetech, Inc. ®
Waldo, Ohio