

## NON-COOPER STAFF - COURSE REGISTRATION

Do not use for Life Support Training Courses

COURSE TITLE: \_\_\_\_\_ COURSE DATE: \_\_\_\_\_

NAME: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_  
(Required for Confirmation)

HOME ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

FACSIMILE: \_\_\_\_\_ AFFILIATION: \_\_\_\_\_

MAIL OR FAX REGISTRATION TO: **Cooper University Health Care, Attention: PCS-Education, One Cooper Plaza, Camden, NJ 08103-1489, Facsimile: (856) 968-8385.** If you are unable to attend after registering, please contact us at (856) 342-2459 option 1 or (856) 342-2142.

Cost of Activity: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Parking not included)

### REFUND POLICY

Cancellations received more than 7 days before the course will receive the registration fee. Cancellation received within 7 days of the course will receive the registration fee minus \$50.00 for the course material fees. No refunds for cancellations within 48 hours of the course.

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