



Kettering National Seminars

(800) 445-0860 or (937) 433-5631

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Dear Friends,

Help to bring the **Kettering National Seminar** to your area and receive a special group discount rate. Send a \$65 deposit by May 5, 2005 to be included in this offer. After this date, normal rates apply. Contact our office for details.

Milwaukee Area Technical College in the **Milwaukee, Wisconsin** area is planning to offer the Comprehensive Respiratory Review seminar on **July 5,6,7,8, 2005** (provided they receive the minimum required registrations). This program will fully prepare you to pass the Certification, the Written Registry, the Clinical Simulation, or all three exams.

If you would like to be part of this group and help bring the seminar to your area, simply fill out this form and return it to **Laura Kranitz at Milwaukee Area Technical College, Respiratory Therapy Program, 700 West State Street, Milwaukee, WI, 53233** (414-297-6600) with your \$65 deposit or full payment.

If a minimum number of registrations are received by the deadline, the seminar will be confirmed and your registration will be sent to our office. Once we receive your registration, we will send you a confirmation letter with detail directions to the seminar. If there is not sufficient interest, all monies will be returned to you.

So come and join the thousands of individuals who every year make it **easy** to pass their exam the **first time** by attending the review seminar. This program is approved by the AARC for 24 hours of CE credit.

FIRST NAME _____ LAST _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

DAY PHONE () _____ EVE PHONE () _____

EMAIL _____

[] Please fax confirmation (instead of mail) to: () _____

Please register me for: CITY _____ DATES _____

Special Group Discount Rate: \$260 Normal Rate: \$385 **You save: \$125!!**

PAYMENT: [] \$65 deposit by May 5, 2005 - \$195 balance at seminar (No personal checks at door)

[] \$260 paid in full by May 5, 2005 (\$0 balance due at door. Save time!)

METHOD: [] Check/Money Order - Payable to: **Kettering National Seminars** (\$25 returned check fee)

[] VISA/MC/Discover # _____

Name on Card _____ Exp.Date _____

Note: Payments at the seminar must be VISA/MC/Discover, Institutional Check or Money Order only.

This form must be submitted to the seminar sponsor by the deadline listed above. Duplicates are acceptable.

Once we accept your registration, \$65 is non-refundable and guarantees your seat.