**The 7th World Congress of Chinese Medicine Oncology**

**2019 舊金山中醫抗癌大會**

**第七屆世界中醫腫瘤大會**

**舊金山金融區希爾頓大酒店**



**Provider: University of Herbal Medicine**

**Approved CEUs: LAc: 33 credits; NCCAOM：33 credits**

**Program One**

**Date:** November 16-17, 2019

**Time:** 8:30am – 6:30pm (Pacific Time)

**∙** *Registration starts at 7:30am*

**∙** *Lunch Break: 12:30-2:00*

**Place:** San Francisco Hilton Hotel

Conference Room (3rd Floor)

750 Kearny St. San Francisco, CA 94108

**Program Two**

**Date:** November 18-19,2019

**Time**: 8:30am-6:30pm( Pacific Time)

**∙** *Registration starts at7:30am*

**∙** *Lunch Break: 12:30-2:00*

**Place:** University of Herbal Medicine

2497-2499 Industrial PKWY West

Hayward, CA 94545

**Early Registration for Acupuncturists of California and NCCAOM by October 20, 2019**

**$268 for 4 days (30% discount) for all CEUs**

Register online or call 650 350 1863

Or Text Message to 650 918 9968

Fax 650 286 1965 email: [consotherapy@gmail.com](mailto:consotherapy@gmail.com)

Website: [www.universityofherbalmedicine.org](http://www.universityofherbalmedicine.org)

**Registration Form**

Date:

Last Name: First Name:

NCCAOM number #: LAc. Number, if have one

Other Profession:

Address:

Email:

Phone: Cell:

The 7th World Congress of Chinese Medicine Oncology is hold in English and Chinese. Nov 16-17 are in English and Chinese : translator on site. Nov 18-19 Dr Mah class is hold in English and Chinese,( Nov 18,room 1 Chinese only).

Language Preferred (Circle One): English Mandarin Other -Specify\_\_\_\_\_\_\_\_

Please indicate which CEUs you need: LAc 　　NCCAOM 　 Both-no extra charge

Brief Introduction (optional)

Suggestion to the conference (optional)

**Fees**：

**Fees for Acupuncturists of California and NCCAOM. Please choose which days you want to join the class.**

Four-Day classes $380 ($268 for early bird special at 30% discount)

You can also choose the following and get the same early bird special by October 20 at 30% discount: Nov. 16-17: One day $95 ($66.5 with discount) Two days $190 ($133 with discount)

Nov.18: Class in Room 1 by Dr. Wang Yougeng and Dr. Lou Wei: $95 ($66.5 before Oct.20）

Nov. 18-19: Class in Room 2 (cancer topic) by Dr. Jeffrey Zhongxue Mah ( Ma Zhong xue) : $190 ($133 with discount

**Fees for Other Medical Professions. Please choose which days you want to join the class.**

$388 for total 3 days Nov. 16, 17 , ( give one day free :Nov 18 in room 1 )

$598 for 2 days option. Nov. 18-19( In room 2 Dr Mah class for Cancer topic )

4 Days class, $688 for all 4 days class

**Refund Policy**: A written notice must be submitted by November 10th for full refund. Written requests received between November 11th and November 15th will be refunded at 85%. No refund is allowed on and after November 16th. If you cannot attend the conference and choose not have a refund, you can apply the amounts within three years from November 16, 2019 for other academic events held by University of Herbal Medicine.

**Payment**

**For your safety please only email this form to the provider email : consotherapy @gmail.com**

**You can also call 650 350 1863 or 650 918 9968 to make a payment**

Payment Total \_$\_\_\_\_\_\_\_\_\_\_\_\_

* Payment by Credit Card (Please fill in the information, absolutely confidential)

Card number #： Name on Card：

Effective Date： Three digits code in the back of the card：

Zip code:

Payment Total（ please calculate by yourself）:

Signature：

Please send this form to: [consotherapy@gmail.com](mailto:consotherapy@gmail.com) or Fax 650 286 1965

By Mail: University of Herbal Medicine, 2304 S. El Camino Real, San Mateo, CA 94403

* Payment by Check

Please make it payable to University of Herbal Medicine.

Send your Registration Form and Check to University of Herbal Medicine, 2304 S. El Camino Real, San Mateo, CA 94403.

**Payment Type**

Payment by Credit Card (Please fill in the following information which will be kept confidential and used for billing purposes only)

Card number #： Name on Card：

Effective Date： Three digits code in the back of the card：

Zip code:

Payment Total（ please calculate by yourself）:

Signature：

Payment by Check

Please make check payable to University of Herbal Medicine

Mail To: University of Herbal Medicine, 2304 S. El Camino Real, San Mateo, CA 94403

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Office Note: