



UBC/Gunn IMS Training Registration

CUT OFF DATE FOR REGISTRATION IS ONE MONTH BEFORE THE START OF THE COURSE

A. PERSONAL DETAILS:

PLEASE NOTE: Registrants must be either a Medical Doctor or Licensed Physiotherapist.

Healthcare Discipline: Medical Doctor Physiotherapist

Please indicate the location where you would prefer to take the IMS course (e.g. Vancouver, Calgary, etc). Please note that placement in your course of choice is not guaranteed.

LAST NAME:

FIRST NAME:

Affiliation:

Address:

City:

Province/State:

Postal

Code/Zip:

Phone:

Email:

This is a **TWO PART** certification course:

- Part 1 (4 day Course): \$1850
- Part 2 (3 day Course): \$1375

A deposit of \$1,000 is due at the time of registration; the balance of \$850 is due one month before Part 1 and \$1375 before Part 2. You must complete both Part 1 & 2 within one year to become a certified GUNN IMS Practitioner. You will be contacted regarding your approval for attendance at the course and once we have a placement for you in an upcoming IMS course, you will be contacted regarding payment options. **PLEASE DO NOT SEND PAYMENT DETAILS WITH YOUR APPLICATION, AS YOU MAY NOT BE REGISTERED IN THE NEXT AVAILABLE COURSE.**

UBC/Gunn IMS Course Cancellation Policy:

This course incurs significant nonrefundable expenses prior to the course— please read and carefully understand our cancellation policy before submitting your registration. The Division of Continuing Professional Development reserves the right to cancel a course thirty (30) days prior to the course date. Each registrant will be notified by telephone, followed by written notification and a full refund. The University of British Columbia is not responsible for any costs, including, but not limited to, airline or hotel penalties. Should you need to cancel your registration, you must do so by email to cpd.info@ubc.ca one month before the start of the course. Your registration fee, less a \$50 handling charge, will be refunded.

You may submit your application by:

A) Printing and mailing this form along with the required documentation to:

UBC CPD, Suite 200 East Tower, 555 West 12th, Vancouver, BC V5Z 3X7

B) Emailing a completed form along with scanned copies of all the required documentation to:

cpd.info@ubc.ca

Registration Services provided by UBC CPD.

B. DOCUMENTATION

Please prepare the following documents:

1. Your current CV
Enclosed: YES NO
2. Copy of your degree (English translation). Enclosed: YES NO
3. Certificate /Letter of Good Standing from your College licensing authority **OR** copy of provincial licensing body of current practice if you are **NOT** registered in the province where the course is held.
Enclosed: YES NO
4. Copy of Certificate of Acupuncture - Registration with CAFCI (Acupuncture Foundation). Completion of the (formerly) Level 1 courses Parts 1, 2A & 3A/Certification of Anatomical Acupuncture **or** Dr. Steven Aung Medical Acupuncture Course through the University of Alberta **or** Completion of The McMaster University Contemporary Acupuncture Program for Health Professionals.
Enclosed: YES NO
5. Copy of Level 3 (upper and lower) of the Intermediate Diploma of Manual Therapy certified by the Orthopaedic Division of Canadian Physiotherapy Association (CPA).
Enclosed: YES NO
6. Copy of Malpractice Insurance up to \$3 million per occurrence, effective in Canada.
Enclosed: YES NO
7. Letter from your employer stating that you have at least **4** years of musculoskeletal therapy experience.
Enclosed: YES NO

PLEASE NOTE THAT EITHER 4 OR 5 ABOVE IS REQUIRED

*** Registration forms with missing or incomplete documentation will NOT be accepted.**

Please print and mail completed form and documentation to:
UBC CPD, Suite 200 East Tower, 555 West 12th, Vancouver, BC V5Z 3X7

OR

email completed form and scanned documentation to:
cpd.info@ubc.ca