

Healthcare Garden Design Registration Form

Healthcare Garden Design Professional Development Certificate of Merit Program

**includes one day seminar*

May 15 – 22, 2013

Eight day Certificate of Merit Fee:

Early-bird fee postmarked by April 5, 2013: \$2,995

Fee after April 5, 2013: \$3,495

Gardens that Heal: A Prescription for Wellness One day seminar

May 15, 2013

One Day Seminar Only Fee:

Early-bird fee postmarked by April 5, 2013: \$129

Fee after April 5, 2013: \$149

Please Type or Print.

Program Title _____

Name (Mr., Mrs., Ms., Dr. please circle one) _____

Job Title _____

Organization/Business _____

Address _____

City/State Zip _____

Daytime Phone _____ Evening Phone _____

Fax _____ E-mail _____

Payment Method

Check (Make checks payable to the Chicago Botanic Garden)

American Express Discover Visa MasterCard

Card no. _____ Expiration Date _____

Auth. Code (Last three digits on back of card) _____

Signature _____

Mail To:

Registrar, Joseph Regenstein, Jr.

School of the Chicago Botanic Garden

1000 Lake Cook Rd.

Glencoe, IL 60022