

# Healthcare Garden Design Registration Form

## Healthcare Garden Design Professional Development Certificate of Merit Program

*\*includes one day seminar*

May 14 – May 21, 2014

Eight day Certificate of Merit Fee:

Early-bird fee postmarked by April 4, 2014: \$2,995

Fee after April 4, 2014: \$3,495

## Gardens that Heal: A Prescription for Wellness One day seminar

May 14, 2014

One Day Seminar Only Fee:

Early-bird fee postmarked by April 4, 2014: \$129

Fee after April 4, 2014: \$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