

**Perfusion Technology Review (PTR) Registration Form**

Register for our Perfusion Technology Review by completing this form then returning to: hemetechreview@gmail.com .

 Today’s Date:

 First Name:       Middle Initial:       Last Name:

 Billing Street Address:

 City:

 State:

 Zip:       (**used by your credit card company**)

 Preferred phone:

 Registered e-mail address:

Year graduated Perfusion school:      Your Perfusion School?

Have you taken the ABCP exam?

 current place of employment:

 type of payment: [ ]  Visa [ ]  MC [ ]  Discover [ ]  PayPal (we will invoice upon request)

 CC#:

 3-digit security code #:

 Expiration:

Perfusion Technology Review (PTR): **fee $999.00** includes:

* **portal** **access which WILL EXPIRE: October 31, 2025**
* LIVE webinars as schedule to-be-determined by email
* immediate previous PTR recordings with extra materials used for those presentations
* the practice examinations, practice quizzes and “hints for takers”
* invites to borrow my digital copies of textbook and video material for your single use only
* previous review content from which I have co-authored and participated
* study flashcards with 10,000+ practice test questions from preferred perfusion info sources

**REFUND POLICY: NO REFUNDS WILL BE ISSUED. In the event you are unable to attend your registered session, you will be granted an equal dollar figure credit to ANY Hemetech CEU event up to TWO YEARS forward of the “Today’s Date.”**

|  |  |
| --- | --- |
|  | By checking this box, you acknowledge and accept the refund policy and authorize Hemetech, Inc. to charge your provided payment method the published PTR fee. |
|  | By checking this box, you acknowledge and accept that this is a self-driven program with only live activity as scheduled on <https://www.hemetech.com> and/or email to your registered email address. |
|  | By checking this box, you acknowledge **all** PTR material is to be exclusively for your advancement of perfusion knowledge and not to be used for presentation to **any** other audience in **any** other capacity. |
|  | By checking this box, you acknowledge and accept access to the site as monitored and unauthorized access is prohibited. A single access is granted ONLY for the individual registering for the program. |
|  | A receipt and confirmation will be sent to you via e-mail after successful payment processing.Access to perfusionreview.com portal will be offered within 24 hours of receipt and confirmation. |

For questions or concerns, please contact:

David W. Holt, MA, CCT:

hemetechreview@gmail.com

office: (740) 396-8787 or text

Hemetech, Inc. ®
Waldo, Ohio