Cancer Rehabilitation: ***Functional problems and implications for rehabilitation interventions in patients with a present or past diagnosis of cancer***

Please fill out this Registration Form and email to ***dlai@hrh.ca***

Name_____

Profession_____

Workplace_____

Email_____

Full Address _____

Phone Number_____

CPA number (if applicable)_____

Emergency Contact Person_____

Emergency Contact Number_____

Dietary Restriction (if applicable)_____

Comments (Optional)_____

Payment method (check one) _____ Cheque mailed to Oncology Division

_____ Credit card

Name on Credit Card:_____

Credit card Number:_____ Expiry date: _____

Amount Paid (check one)

Oncology Division Member / Student _____$375 + GST= $393.75

CPA Member/ Lifemark Staff _____$425+ GST= $446.25

Others _____$485+ GST= $509.25