



APPLICATION FORM | AC Summer Conference The Roots of Modern Medicine

To apply for the Augustine College Summer Conference for CMDS/CMDA members (and others) fax the completed form to: (613) 237-3934

Or mail it to: AC Summer Conference / Augustine College / 18 Blackburn Ave. / Ottawa, Ont. K1N 8A3 / Canada

Or use the on-line form at: www.augustinecollege.org/sc\_application.html

APPLICANT INFORMATION

FULL NAME .....

PROFESSION/SPECIALTY .....

E-MAIL .....

ADDRESS & POSTAL CODE .....

COUNTRY .....

AREA CODE & TELEPHONE .....

AREA CODE & CELL PHONE .....

CONFERENCE INFORMATION

1 | How did you hear about the Conference? .....

2 | Check, if you are seeking accreditation for: CMDA  CCFP  ROYAL COLLEGE

3 | Which module (conference year) are you applying for? .....

4 | What would you like on your name tag? .....

5 | Please signal awareness that you are responsible for making your own accommodation arrangements at a local inn, etc.

I WILL ARRANGE FOR MY OWN ACCOMMODATION IN OTTAWA

ATTENDING-SPOUSE INFORMATION

To be filled in only if your spouse is also applying to attend the Conference

SPOUSE'S NAME .....

PROFESSION/SPECIALTY .....

1 | Is your spouse seeking accreditation? CMDA  CCFP  ROYAL COLLEGE

2 | What would your spouse like on his/her name tag? .....