Medical Acupuncture for Physicians
Returning Warrior Application

AC 57 RW

**Bolger Center, Potomac, Maryland**

**Introductory Unit: 16 - 20 April 2015**

**Clinical Unit 1: 10 - 14 July 2015
Clinical Unit 2: 16 - 20 September 2015**

If you are a graduate of the basic MAFP course from May 2013 and later, you may select the clinical unit(s) you wish to attend. If you graduated prior to this date you must take all three live units as a Returning Warrior. Complete this form onscreen, then print and send it with all the required documents by mail or fax to:

Helms Medical Institute
2520 Milvia Street
Berkeley, CA 94704

Fax: 510-649-8692

E-mail: mafp@hmieducation.com

# The following documents are required to process your application:

* Completed application form
* Photocopy or scan of current medical license
* Brief description of current work opportunities

# Select the session(s) you wish to attend:

Tuition $1000:

[ ]  Introductory session (16-20 April 2015)

Tuition $2000 **per** session:

[ ]  Clinical Unit 1 (10-14 July 2015

[ ]  Clinical Unit 2 (16-20 September 2015)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name: |       |  |    |  |       |

 First Initial Last

|  |  |
| --- | --- |
| Degree: |       |

 MD, DO, other

|  |  |
| --- | --- |
| State Medical License #: |       |

|  |  |
| --- | --- |
| Specialty: |       |

|  |  |
| --- | --- |
| E-mail: |       |

|  |  |
| --- | --- |
| Street: |       |

 Street address only, no P.O. boxes

|  |  |
| --- | --- |
| City: |       |

|  |  |  |  |
| --- | --- | --- | --- |
| State: |       | Zip:\_  |       |

|  |  |
| --- | --- |
| Day Phone: |       |

|  |  |
| --- | --- |
| Home Phone: |       |

|  |  |
| --- | --- |
| Cell Phone: |       |

|  |  |
| --- | --- |
| Fax: |       |

Please use the format 555-555-5555.

|  |  |
| --- | --- |
| Year you completed the basic HMI course: |      |

# Select your Returning Warrior pathway:

[ ]  Pain Management [ ]  Primary Care

# Payment: If paying with a check, make it payable to Helms Medical Institute.

|  |  |
| --- | --- |
| Card Number: |       |

 Discover, MasterCard, or Visa only.

|  |  |  |  |
| --- | --- | --- | --- |
| Expiration: |    | / |      |

 Month Year

|  |  |
| --- | --- |
| Cardholder’s Name: |       |

|  |  |
| --- | --- |
| Authorizing Signature: |       |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date: |    | / |    | / |      |

 Month Day Year

All training activities will take place at the Bolger Conference Center, Potomac, Maryland, 45 minutes from Reagan or Dulles International Airports. You are requested to lodge at the hotel where group rates have been arranged. A conference day use fee of $75 per day is required of participants who choose to stay elsewhere or who share a room with another course participant. For additional information concerning this program call 510-649-8488 or e-mail mafp@hmieducation.com. There are a limited number of available positions for Returning Warriors.