

Female and Male Urinary/Fecal Incontinence and Pelvic Organ Prolapse: An intensive intro course

Registration form

November 2021

Please complete, print, scan and email all 3 pages of this form and send completed form back to PelvicRehabCourses@gmail.com to complete your registration.

First name	Last name			
Email				
Phone number				
(###) ###-####				
Physiotherapy registration # (or student #)	Province of registration (or name of academic institution)			
How did you hear about us? (i.e. previous course, anoth	her physiotherapist, PABC course listing or e-blast, search engine, social			
Please share any clinical questions you would like addressed in the course				
Anything else you want us to know or ask us?				
Willing to pair during practical component	female lab partner male lab partner			
If you have questions regarding participation in the pra	actical component, which will involve internal vaginal and/or rectal exams,			

please contact PelvicRehabCourses@gmail.com for additional information.



Female and Male Urinary/Fecal Incontinence and Pelvic Organ Prolapse: An intensive intro course

COURSE SELECTION

Course Format

- Online live lecture, discussion, case studies and lab
- Lab component involves internal vaginal and rectal palpation

Course Dates and Times

full attendance (online and lab) is required to receive course certificate

online: Friday November 19, 2021, 8AM - 4PM PDT

and

lab: Vancouver- Saturday & Sunday November 20-21, 8AM - 4PM PDT

Location: Envision Physiotherapy 672 leg in Boot Square Vancouver, BC V5Z 4B4

TUITION

Registered Physiotherapists and other licensed health professionals:

Rate: \$750.00 + 5% GST (\$787.50)

Amount paid:

PAYMENT

E-transfer to PelvicRehabCourses@gmail.com



Female and Male Urinary/Fecal Incontinence and Pelvic Organ Prolapse: An intensive intro course

CANCELLATION POLICY & PARTICIPANT CONSENT AND WAIVER

PARTICIPANTS: READ THIS DOCUMENT CAREFULLY. THIS DOCUMENT HAS LEGAL CONSEQUENCES AND WILL AFFECT YOUR LEGAL RIGHTS.

I understand and acknowledge that by signing below, I agree to the following Cancellation Policy and Participant Consent and Waiver (the "Agreement") in exchange for being permitted to participate in the above-noted course (the "Course") offered by Marcy Dayan Physiotherapist Corporation doing business as Pelvic Rehab Courses.

Cancellation Policy

100% reimbursement less an administration fee of \$75.00 is given if written notice is provided 6 weeks before the start date of the Course. 50% reimbursement less an administration fee of \$75.00 is given if written notice is provided 4 weeks before the start date of the Course. No reimbursement will be provided if cancelled less than 4 weeks from the start date of the Course.

I understand that Course organizers may cancel the Course due to insufficient registration on or by 3 weeks before the start date of the course. Course organizers assume no responsibility for any and all incurred expenses or other details incurred by Course registrants related to Course cancellation. A full refund will be given if the Course is cancelled by the Course organizers.

Dates of the Course, including the lab/practical component, are subject to change depending on government restrictions and/or public health advisories related to the Covid-19 pandemic. Course organizers assume no responsibility for any and all incurred expenses or other details incurred by Course registrants related to Course cancellation or date changes.

Participant Consent and Waiver

I am aware that the Course contains lectures, discussion, demonstrations and practical sessions/labs, in which participants may be allowed, but shall not be required, to act as a model for fellow participants, the instructor or teaching/lab assistants. Doing so may involve following instructions, undergoing assessment or evaluation procedures, and/or undergoing treatment procedures that include an internal vaginal and/or rectal evaluation.

I consent to act as a model in the Course, which may include an internal vaginal and/or rectal evaluation. I understand that my participation as a model is entirely voluntary and that I may withdraw my participation or consent to act as a model at any time.

I freely and voluntarily accept and assume all risks, both known and unknown, including the possibility of personal injury or death resulting from the attendance at the Course and any other related activities during the Course, including without limitation participating as a model, and assume full responsibility for participation in the Course.

I am participating in the Course upon the express agreement and understanding that I waive, release and forever discharge Marcy Dayan Physiotherapist Corporation, Marcia Dayan, Anna Hudon-Kaide and Pelvic Rehab Courses and their shareholders, directors, officers, employees, contractors, agents, trustees, beneficiaries, administrators, executors, assigns and each of them (collectively referred to as the "Releasees") from any and all claims, cost, liabilities, expense or judgments, including legal fees and court costs arising (herein, collectively "claims") that I have, or may have in the future, arising from my participation in any of the Releasees' Courses, including without limitation my participation as a model in connection with the Course, or any illness or injury resulting from such participation. I hereby further agree to indemnify and hold harmless the Releasees from and against any and all such actions, claims, expenses, costs or losses arising due to any cause whatsoever including negligence, gross negligence, breach of contract, breach of any statutory or other duty of care, on the part of the Releasees. I further agree to indemnify and hold harmless the Releasees from any and all liabilities, damages, costs (including solicitor and his own client costs), expenses and compensation of any kind in respect of any claim or action brought by third parties against the Releasees relating to my participation in the Course or my application of the skills and techniques taught in the Course.

This Agreement shall be binding upon my heirs, executors, administrators, assignees, representatives, and guardians. I agree that if any provision of this Agreement is held to be invalid or unenforceable for any reason, the remaining provisions will continue in full force and effect without being impaired or invalidated in any way. I agree that this Agreement shall be construed in accordance with the laws of the Province of British Columbia and the federal laws of Canada applicable therein, and accept and submit to the exclusive jurisdiction of the courts of the Province of British Columbia.

Executed in the City of	in the Province of	this day of	, 20
Witness Signature	 Partici	ipant's Signature	-
Print name:	Print n	ame:	