

Name

Address:

State/Province

Zip/Postal Code

Email

Phone:

Credit Card *



Card Number

Expiration Date

Security Code



Cardholder Name

Payment Options:

Payment in Full (\$10,500)

\$10,500.00

Monthly Payments beginning in Jan - \$1312.50/mo.

\$1,312.50

Monthly Payments beginning in Feb - \$1500/mo.

\$1,500.00

Monthly Payments beginning in March - \$1750/mo.

\$1,750.00

Monthly Payments beginning in April - \$2100/mo.

\$2,100.00

Monthly Payments beginning in May - \$2625/mo.

\$2,625.00

Monthly Payments beginning in June - \$3500/mo.

\$3,500.00

Monthly Payments beginning in July - \$5250/mo.

\$5,250.00

Monthly Payments beginning in August - \$10,500.

\$10,500.00

Custom plans also available - please contact Debbie

Refunds (minus credit card fees plus \$250) made only if another doctor is registered in your place prior to the beginning of the mini-residency.

Please fax (805-446-9157) or scan/email (hang@facefocused.com) your completed registration form.