

# Registration

[REMOVE THIS PART]

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal/Zip code: \_\_\_\_\_ Country: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Office Telephone: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Male  Female  Profession: \_\_\_\_\_ Level of studies: \_\_\_\_\_

E-mail: \_\_\_\_\_

Reference: \_\_\_\_\_ Specify: \_\_\_\_\_

1a – I request admission to the following (Check the appropriate code number and write the name below):

\_\_\_\_\_

- 1b – I am registering for personal studies (no exams).
- 1c – I plan to spend \_\_\_\_\_ hours per week for my studies.
- 1d – I need to take the A & P course.

MARK YOUR CHOICE	CODE #	# OF CREDITS	HOURS PLANNED
<input type="radio"/> Program			
<input type="radio"/> Module			
<input type="radio"/> Theme, course			
<input type="radio"/> Equivalency			

• 2a – I wish to receive exam exemptions for the following courses # \_\_\_\_\_

• 2b – I wish to receive exemption for the following course(s) # \_\_\_\_\_

• 2c – I am including an Equivalency Request Form.

• 3a – I wish to start my studies  As soon as possible 3b  On next \_\_\_\_\_ month

• 3c – I plan on completing my studies in \_\_\_\_\_ months

• 3d – I am including a letter of intention for the payment of my tuition fees by a Third Party

# Registration

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## Fees

- 4a -Tuition fees: \_\_\_\_\_  
(indicate the total amount for the complete program)

First installment details:

- 4b – First installment or complete tuition fee \_\_\_\_\_
- 4c – Anatomy & Physiology course \_\_\_\_\_
- 4d – Total paid by: \_\_\_\_\_
  - Bank transfer
  - Credit card Paypal  other: \_\_\_\_\_

*With the admission validation from AMCC, I will receive a statement with complete details and will be able to confirm my admission.*

## Deferred Payments (if applicable)

- 5a –  Please adjust the payment balance according to my pace of studies.
- 5b –  I wish to benefit from automated payments without any administrative fees:
  - Credit card on-line or  Paypal
  - Automatic bank transfer
- 5c –  I wish to pay the balance with non-automated payments.  
*NOTE: You must obtain a clearance with the AMCC first. Non-automated payments are subject to administrative fees.*

## Other possible fees and rebates

- I am registering for a program and I am eligible for a 100% rebate on the Anatomy and Physiology course. I will be responsible for the purchase of the mandatory reference manual.

## IN ORDER TO AVOID DELAYS, I AM INCLUDING:

- A letter stating my plans and motivations.
- A resume of my professional and scholar experience.
- Documentary evidence for my exemption or equivalency request.
- A payment (or proof of payment) for first deposit or a complete single payment.
- A recent picture of myself, stapled to the back of this sheet.

*If I am not accepted, all documents and payments will be returned to me by the AMCC, except for the Registration Fee. I have read and accept to follow AMCC's current conditions and regulations.*

<http://www.cmdq.com/telechargement/fichiers/conditions.pdf>

Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Signature: \_\_\_\_\_

## Mail to:

**AMCC, 134 West St-Joseph, Montreal,  
QUEBEC H2T 2P6, CANADA**

**Keep a copy of this form**

**Need Help ? Contact us at 514 270-5318**

**Toll Free : 1800 663-8380**

**or by mail: [info@alternativemedicinecollege.com](mailto:info@alternativemedicinecollege.com)**