

ELECTIVE COURSES – CAN BE USED FOR CONTINUING EDUCATION COURSE OR CORE				
T305/E305	LYMPHATIC DRAINAGE TECHNIQUE Gleason **Practicum required	42 Hrs.	Wed. JULY 3–SEPT 4 6:00P– 10:35P	E305 □ 900.00 *\$940 after 6/24/19
T307	NEUROMUSCULAR THERAPY Phillips **Practicum required	42 Hrs.	Tue. JULY 2 – SEPT 3 6:00P – 10:35P	E307 □ 900.00 *\$940 after 6/24/19
CONTINUING EDUCATION FOR LICENSE RENEWAL				
C403	REIKI – 2 nd DEGREE McDaniel	13 Hrs.	Sat./Sun. JULY 13-14 9:00AM – 4:30PM	C403 □ 270.00* *\$310 after 7/3/19
C102	CHAIR MASSAGE Hooten	13 Hrs.	Sat/Sun JULY 27-28 9:00AM-4:30PM *Includes Chair Rental	C102 □ 300.00* *\$340 after 7/18/19
C902	CUBE CARE CLASS-SELF-CARE FOR THERAPIST Rebecca Lowe, OMPT	3 Hrs.	Fri. AUG. 2 6:00PM – 9:00 PM *\$100 Tuition +\$25 for cube to take home	C902 □ 125.00* *\$165 after 7/25/19
C420	THE EIGHT LIMBS OF YOGA Lynn Smith, LMT	8 Hrs.	Sat. AUG 3 8:00AM – 5:00 PM	C420 □ 190.00* *\$230 after 7/25/19
C407	CAVE DAY McDaniel	8 Hrs.	Sat. AUG. 10 8:30AM – 5:30PM	C407 □ 190.00* *\$230 after 8/1/19
M507	5-Hour TN MASSAGE LAW(Out of State LMT's seeking TN Licensure) Sommers	5 Hrs.	Thur. AUG 15 9:00AM – 2:00 PM	M507 □ 150.00
C512	2-Hour TN MASSAGE LAW for Establishment Owners Sommers	2 Hrs.	Thur. AUG 15 3:30 PM – 5:30 PM	C512 □ 150.00
C935	SCRAPE AND TAPE Dr. Jenson Gillette, DC & Robin Green, LMT	12 Hrs.	Sat/Sun. AUG 17-18 9:00AM–4:00PM *Tool usage provided in the class. Students must show proof of professional liability to register.	C935 □ 515.00* *\$555 after 8/8/19
C406	CHAKRA PRINCIPLES McDaniel	8 Hrs.	Sat. AUG 24 8:30AM-5:30PM	C406 □ 190.00* *\$230 after 8/15/19
C 413	AROMATHERAPY 2 Crawford	8 Hrs.	Sun. AUG. 25 8:30AM – 5:30 PM *Prerequisite: C408 Basic Aromatherapy * Oil usage in class included in pricing	C413 □ 250.00* *\$290 after 8/15/19
C226	PEREGRINE FRAMEWORK – LEVEL 1 Understanding the Physiology of Perception & Holistic Care Oldham and Stahl	21 Hrs.	Mon/Tue/Wed AUG. 26-28 8:30AM – 5:30 PM	C226 □ 515.00* *\$555 after 8/15/19
C402	REIKI 1 McDaniel	13 Hrs.	Sat/Sun. SEPT. 7-8 9:00AM – 4:30PM	C402 □ 270.00* *\$310 after 8/29/19
C 116	UNDERSTANDING HOW TO MASSAGE LYMPHEDEMA PATIENTS Gleason	4 Hrs.	Sat. SEPT. 7 8:00 AM – Noon	C116 □ 119.00* *\$159 after 8/29/19
C315	FIVE ELEMENT THEORY Sommers	8 Hrs.	Sat. SEPT. 14 8:30AM – 5:30PM	C315 □ 190.00* *\$230 after 9/5/19
C505/C513	TN MASSAGE LAW & ETHICS Sommers	4 Hrs.	Sun. SEPT. 15 8:00AM –Noon	C505 □ 120.00* *\$160 after 9/9/19
C208	MASSAGE TECHNIQUES FOR ROTATOR CUFF DYSFUNCTION Aaron Duncan, LMT, DC	8 Hrs.	Mon. SEPT. 23 8:30AM-5:30PM	C208 □ 190.00* *\$230 after 9/16/19
C801	TRADITIONAL THAI MASSAGE 3-DAY INTENSIVE NCBTMB #451012-09 Living Sabai-Rue	21 Hrs.	Fri/Sat – SEPT. 27-28 9:00AM– 5:30 PM Sun – SEPT. 29 8:30 AM – 3:30 PM	C801 □ 379.00* *\$419 after 9/18/19

INTRO-EVENING FOR PROSPECTIVE STUDENTS: SEPT. 6, 2019 FROM 5:30 PM – 7:20 PM--Free

<p>I understand that I am obligated to pay only the tuition for which I am registering.</p> <p>Student Signature _____ Date _____</p> <p>SS# _____</p> <p>Name _____</p> <p>Address _____</p> <p>City _____ State _____ Zip _____</p> <p>Home/Work/Cell: _____</p> <p>Email Address _____</p> <p><input type="checkbox"/> Check box if you do <u>not</u> wish to receive communication from Cumberland</p> <p>Submit Registration & Payment to: Cumberland Institute 500 Wilson Pike Circle, Suite 121 Brentwood, TN 37027 Tel 615-370-9794, ext. 10, Fax: 615-370-5869</p>	<table> <tr> <td>Tuition Total</td> <td>\$ _____</td> </tr> <tr> <td>\$40 Late Registration or Payment fee</td> <td>\$ _____</td> </tr> <tr> <td>Supplies, Table, Insurance</td> <td>\$ _____</td> </tr> <tr> <td>Total Fees Due</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Full Payment Enclosed</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> 1/3 Payment Enclosed</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> VA Education Payment</td> <td>\$ _____</td> </tr> </table> <p><input type="checkbox"/> Cash <input type="checkbox"/> Check or Money Order <input type="checkbox"/> Discover <input type="checkbox"/> MC/VISA</p> <p>Card Exp Date _____ Sec Code _____</p> <p>Card # _____</p> <p>Name on Card _____</p> <p>Card billing street no. /zip code _____ / _____</p>	Tuition Total	\$ _____	\$40 Late Registration or Payment fee	\$ _____	Supplies, Table, Insurance	\$ _____	Total Fees Due	\$ _____	<input type="checkbox"/> Full Payment Enclosed	\$ _____	<input type="checkbox"/> 1/3 Payment Enclosed	\$ _____	<input type="checkbox"/> VA Education Payment	\$ _____
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