

CORE COURSES				
T101A	INTRODUCTION TO MASSAGE Hooten	Rm. 200	Mon SEPT 28-DEC 7 6:00PM-7:15PM No Classes Thanksgiving Week	T 101-E □ 330.00
T102	TOUCH DYNAMICS McDaniel	Rm. 200	Mon SEPT 28-DEC 7 7:30PM-9:55PM No Classes Thanksgiving Week	T 102-E □ 550.00
T106	MASSAGE ETHICS & TN LAW Sommers	Rm. 100	5 Tuesdays: Sept 29, Oct 13, Nov. 3, Nov. 17 & Dec 1 6:00PM-9:55PM	T 106-E □ 500.00
T202	PHYSIOLOGY Potts	Rm. 100	Thurs OCT 1-DEC 10 6:00PM-9:35PM No Classes Thanksgiving Week	T 202-E □ 700.00
T205	TERMINOLOGY & PATHOLOGY Hooten	Rm. 100	Mon SEPT 28-DEC 7 7:30PM-9:55PM No Classes Thanksgiving Week	T 205-E □ 550.00
T302	SWEDISH MASSAGE Mindigo	Rm. 200	Tues SEPT 29-DEC 8 6:00PM-10:35PM No Classes Thanksgiving Week	T 302-E □ 900.00
T306	ACUPRESSURE FOR MASSAGE Crawford	Rm. 200	Wed SEPT 30-DEC 9 6:00PM-10:35PM No Classes Thanksgiving Week	T 306-E □ 900.00
T308	INTEGRATIVE THERAPY Oldham	Rm. 200	Thurs OCT 1-DEC 10 6:00PM-10:35PM No Classes Thanksgiving Week	T 308-E □ 900.00
T402	CLINICAL INTERNSHIP Oldham	Rm. 200	Fri. SEP 11 8:00AM - 3:15PM (1 Hr. Lunch) Sun. OCT 11 & NOV 15 4:00-7:15 PM Fri. DEC 4 3:00 PM - 5:15 PM	T 402 □ 600.00

ELECTIVE COURSES CAN BE USED FOR CONTINUING EDUCATION OR CORE

T502/E502	CRANIOSACRAL THERAPY* McDaniel **Practicum required for course credit	Rm 200	Sat/Sun OCT. 3-4 9:00A - 5:30P Sat/Sun NOV. 7-8 9:00A - 5:30P Sat/Sun DEC. 5-6 9:00A - 5:30P	T502 □ 900.00 *\$945 after 6/22/20
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INTRO EVENING FOR PROSPECTIVE STUDENTS: FRIDAY, December 4, 2020 5:30PM - 7:30PM FREE

I understand that I am obligated to pay only the tuition for which I am registering.

Student Signature _____ Date _____

SS# _____

Name _____

Address _____

City _____ State _____ Zip _____

Home/Work/Cell: _____

Email Address _____

Check box if you do not wish to receive communication from Cumberland

Send Registration & Payment to:
Cumberland Institute 500 Wilson Pike Circle, Suite 121
 Brentwood, TN 37027
 Tel 615-370-9794

Tuition Total	\$ _____
Table fee, insurance, Track Change, etc.)	\$ _____
\$45.00 Late Registration fee	\$ _____
Total Fees Due	\$ _____
<input type="checkbox"/> Full Payment Enclosed	\$ _____
<input type="checkbox"/> 1/3 Payment Enclosed	\$ _____
<input type="checkbox"/> Debit my pre-paid tuition account	
<input type="checkbox"/> Vocational Rehabilitation/VA	

Cash Check or Money Order Discover MC/VISA

Card Exp Date _____ Sec Code _____

Card # _____

Name on Card _____

Card billing street no/zip code _____ / _____