

REGISTRAR
Board of Registration
C.I.P.H.I., B.C. Branch
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**BOARD OF REGISTRATION
CONTINUING EDUCATION
REGISTRY FORM**



(Please complete the Member Information Box, ONE of the Credit Information Boxes and Enclose information about the course/conference/in-service or your presentation or paper.)

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NAME OF COURSE: _____ OFFERED BY: _____
COURSE HOURS: _____ CREDIT: Y N MARK: _____ TRANSCRIPT ATTACHED: Y N
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PROFESSIONAL PRESENTATION/TECHNICAL PAPER PUBLISHED INFORMATION:

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Signature: _____ Date Form Completed: _____