



**“Clinical Analysis of 24 Adult Foot Types:
A Comprehensive Approach to Determining Orthotic Intervention”**

**Stride, Inc. Continuing Education Registration Form
Please Print Clearly**

Course City and Dates: _____

Name and Credentials: _____

(As to appear on course certificate)

Office Name: _____

Preferred Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: _____ Cell Phone: _____

E-mail Address: _____

(please print clearly as e-mail will be our primary mode of communication)

Course Tuition: \$450

Make checks payable to Stride, Inc., or tuition may be charged on: check one

- Visa _____
- MasterCard: _____

Account #: _____ Exp. Date: _____ 3 digit sec code: _____

Signature: _____ CC Billing Zip: _____

Please return this form to:

Stride, Inc. 80 Turnpike Dr. Unit 1 Middlebury, CT 06762

Or fax to: (203) 758-8394

Stride reserves the right to cancel a course due to insufficient enrollment. Course fees, in this event, will be refunded.

We recommend you contact Stride to confirm course information prior to making travel arrangements, such as airfare.

For more information and general questions regarding our courses, contact Joe Coletta at (203) 725-6790 or e-mail Joe at jcoletta@strideorthotics.com.

Stride Orthotics Continuing Education Program
Courses: (203) 725-6790 Fabrication Facility (800) 787-7879
80 Turnpike Drive, Unit #1, Middlebury, CT 06762
www.strideorthotics.com