

# Anatomy and Physiology Class

## April – August 2021

This course studies the parts of the human body and how those parts function. The student will learn body organization at different levels, the body's chemical processes, the various organ systems involved, as well as related conditions and diseases.

When: Mondays and Wednesdays 6:00pm-9:00pm **4/19/21 - 8/4/21**

Cost: \$275.00 - Textbook is an additional fee.

This course is recommended for IU Health's Surgical Technology Program. It **cannot** be transferred for college credit.

### HOW TO REGISTER

Complete the registration form attached and bring/mail payment to Indiana University Health, Health Sciences Education, 1812 N. Capitol Avenue, Wile Hall-Room 629. Cash (have exact amount), Money order, MasterCard, Visa or Discover cards are accepted. Registration forms are also located in the Health Sciences Education Department (Wile Hall-Room 629). ***For general questions about the course, contact Diana Carlton at [dcarlton@iuhealth.org](mailto:dcarlton@iuhealth.org) or call 317-962-5470.***

### REFUND

If you determine that it's necessary to withdraw from the course, please contact Diana.

#### Below is how the refund is figured.

<b>100%</b>	<b>Prior to the start of the course</b>
<b>80%</b>	<b>During the first week of the course</b>
<b>60%</b>	<b>During the second week of the course</b>
<b>40%</b>	<b>During the third week of the course</b>
<b>0%</b>	<b>After the third week of the course</b>

# ANATOMY & PHYSIOLOGY COURSE REGISTRATION FORM

To expedite the processing of your registration, please **use a black or blue pen** to complete **ALL** information, **printing legibly**. Incomplete registrations cannot be honored. Use only one form per person. Course is filled in the order in which registrations are received, so return this form early! In fairness to everyone, call in advance if you must drop the course. This frees up your spot for someone else (who may be on a wait list).

**Today's Date:** \_\_\_\_\_

Enter your personal identification here (required for registration)

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone # (\_\_\_\_\_) \_\_\_\_\_

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

## PAYMENT OPTIONS

**Course Fee: \$275.00**

I am paying by:  CASH  MONEY ORDER  MC  VISA  DISCOVER  
Exact Amount

**\*\*No personal checks accepted – if paying by credit card it needs to be done in-person.  
Please call or email Diana first - before coming to make sure she will be in the office.**

**Note:** Mail or bring this form with payment to Indiana University Health, Health Sciences Education, 1812 N. Capitol Avenue, Wile Hall-Room 629, Indianapolis, IN 46202. Instructions for textbook will be given to you once you register for the course. It is recommended that you purchase the book prior to the first day of class.

**Questions? Call 317-962-5470 between the hours of 7AM and 3PM – Monday through Thursday.**