



Promoting Safety and Competence

Federation of State Boards of Physical Therapy
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NPTE Workshop for Educators
External Payment Form

Please submit this form with your check or money order. Please also fill out the online registration on the NPTE Workshop for Educators webpage, because this form is for record of payment only.

Workshop: October 19-21, 2018

Name of Program: Check one: PT Program PTA Program

Address: City, State, Zip:

Registrants: (Please check all categories that apply.)

Table with 8 columns: Name, Email Address, Phone, Administrator, ACCE, Adjunct Faculty, Clinical Instructor, Faculty. It contains five empty rows for data entry.

Registration Fee: \$595.00 X (No. of registrations) = \$

Payment Instructions: If paying by certified or corporate check or money order, please attach payment to this registration form and mail in. If you have any questions, please do not facultyworkshop@fsbpt.org.

How would you like to pay?

- Certified or Corporate Check
Money Order

Name of contact:

Phone number of contact:

Last 4 digits of Check:

Signature: