

Activity Director Certification Services

Mail registration and check payable to: **Theresa Thorland**
10509 390th Street
Thompson, IA 50478

Fax or email registration and credit card information to: 641-584-2870 / dtntt@wctatel.net

Call in credit card information to: **641-390-0223** Secondary: **641-590-2673**

Credit Card #: _____ Expiration Date: _____

3 Digit Security Code #: _____ Credit Card Billing Zip Code: _____

- **Activities 101 / Home Care Certification (10 CEs):** \$110.00 _____
*Student is to purchase book **Activities 101 - Complete** separate from course fee
Ordering options: www.amazon.com or
R.O.S. Therapy Systems, www.ROSTherapySystems.com 888-352-9788
- **Assessing Individual Resident Sensory Preferences (10.5 CEs):** \$115.00 _____
*No book required
- **Canned Soup Or Make Your Own Chef Salad (13 CEs)** \$135.00 _____
*No book required
- **Documentation Overview for Activity/Recreation Professionals in Elder Care (10 CEs)** \$110.00 _____
*Student is to purchase book **Documentation in a SNAP 4th Edition** by Ann G. Uniack separate from course fee
Ordering options: Idyll Arbor, INC. Phone: 360-825-7797 Website: www.idyllarbor.com
- **Effective Programming for Alzheimer's & Dementia Residents (6.5 CEs):** \$65.00 _____
*No book required
- **Enhancing Wellness Through Sensory Stimulation (8 CEs):** \$85.00 _____
*No book required

Registration fee is nonrefundable after 7 days from receiving payment

Student Information

Name---Please print clearly _____

Street---Please print clearly _____

City, State, Zip---Please print clearly _____

Phone _____

E-mail---Please print clearly _____

Signature/Date _____