



## Physio Logic Ltd Presents

# The Shoulder Defined

### A one day workshop

For Physiotherapists, Osteopaths, Sports Therapists

**Wednesday 24<sup>th</sup> March 2010**

1pm – 9pm

Course Fee: £105.00

Venue: Physio Logic Ltd, 26 Westgate, Otley, West Yorks, LS21 3AS

*Registration is at 12.45 pm – coffee and biscuits will be served*

*(Please note that lunch / tea is **not** included)*

Tutor: **Prof. Graham N Smith** FCSP GradDipPhys DipTP CertED  
Chartered & HPC Registered Physiotherapist  
Rehabilitation & Sports Injury Consultant, Glasgow

#### **COURSE AIMS:**

To give physiotherapists an understanding of the regional and functional anatomy of the shoulder complex.

Also to increase the physiotherapists confidence in assessing, understanding & managing shoulder complex problems in a clinical environment.

The workshop will further highlight some current trends and philosophies related to the clinical assessment of shoulder complex problems with reference to the appropriate evidence & research.

***As there is a strong demand for attendance on the above course, places will be limited and allocated on a 'first come, first served' basis. To avoid disappointment please print off and complete the application form enclosed, for each applicant and send with appropriate payment as soon as possible to***

***Physio Logic Ltd, 26 Westgate, Otley, West Yorks, LS21 3AS***

*Physio Logic Ltd, 26 Westgate, Otley, West Yorks, LS21 3AS*

*Tel: 01943 850723, Email: [cpd@physio-logic.co.uk](mailto:cpd@physio-logic.co.uk)*

*Registered Office: 60 Riverside Park, Oley, LS21 2RW Registered No: 4594644 England*



## PHYSIO LOGIC LTD – COURSE PAYMENT FORM

SURNAME..... TITLE: DR. / MR / MRS / MISS  
FIRST NAME..... TEL(home) .....  
ADDRESS (including house number) ..... TEL(work) .....  
..... MOBILE .....  
..... E-MAIL .....  
..... POSTCODE .....  
YOUR PROFESSION.....

PLEASE RETURN COMPLETED FORM BY POST TO:

PHYSIO LOGIC LTD, 26 WESTGATE, OTLEY, WEST YORKSHIRE, LS21 3AS

On signing this form applicants accept responsibility for their own physical well being whilst participating in the post-graduate training courses at Physio Logic Ltd.

Applicant's signature ..... Date .....

### PAYMENT DETAILS: YOUR PLACE WILL ONLY BE SECURED ON PAYMENT OF THE FULL FEE.

**NB: Monies will only be refunded in the event of a course being cancelled.  
We regret no refund will be offered for cancellation of a delegate place once confirmed.**

- I wish to attend The Knee Explained on Wed 3<sup>rd</sup> March 2010 Fee: £105
- I wish to attend The Shoulder Defined on Wed 24<sup>th</sup> March 2010 Fee: £105
- I have enclosed a cheque payable to PHYSIO LOGIC LTD for the total of £ .....
- I have enclosed my credit card details below

CARD NUMBER:..... CARD TYPE: VISA / SWITCH / MASTERCARD

EXPIRY DATE: \_\_ \_\_ / \_\_ \_\_ START DATE: \_\_ \_\_ / \_\_ \_\_ ISSUE NO: (switch only) \_\_\_\_\_

SECURITY CODE: \_\_ \_\_ \_\_ (last three digits of security code on back of card)

**I hereby authorise Physio Logic Ltd to deduct (please state amount in words)**

**from my credit / debit card in respect of my course fees. I understand that my details will not be held on record and will be immediately disposed of in accordance with their data protection policies.**

Signed: \_\_\_\_\_ Date \_\_\_\_\_