

Diplomate American Chiropractic Board of Sports Physicians® (DACBSP®) PROGRAM



DConline BRINGS YOU EXCELLENCE IN SPORTS MEDICINE EDUCATION.

Differentiate your chiropractic care as a **SPORTS SPECIALIST** and join the **TOP TIER** of your profession. Register today for the DACBSP® program.

COORDINATOR: Dr. William Moreau, Chief Medical Officer of the 2016 Rio and 2018 PyeongChang Olympic Games

JOIN US FOR THE 2019 DACBSP® PROGRAM IN DENVER, CO

September 21-22, 2019

TEAM PHYSICIAN CONCEPTS, CONCUSSION AND THE PEDIATRIC ATHLETE
with William Moreau, DC, DACBSP and Dustin Nabhan, DC, DACBSP®

October 12-13, 2019

EVALUATION AND MANAGEMENT OF THE UPPER EXTREMITIES
with Dale Buchberger, MS, PT, DC, CSCS, DACBSP®

November 9-10, 2019

EVALUATION AND MANAGEMENT OF THE LOWER EXTREMITIES
with Greg Bauer, DC, DACBSP®

ULTRA-ENDURANCE ATHLETE

with Kelly Shockley, DC, DACBSP®

December 7-8, 2019

SOFT TISSUE - PATHOLOGY, REGIONAL EXAMINATION AND TREATMENT
with Joseph Horrigan, DC, DACBSP®

SPECIAL POPULATIONS

with Robert Nelson, DC, DACBSP®

January 18-19, 2020

REHABILITATION OF THE SPINE AND EXTREMITIES
with Brendan Murray, DC, DACBSP®

February 8-9, 2020

STRENGTH AND CONDITIONING/SPORTS PERFORMANCE
with Andy Klein, DC, DACBSP®

March 14-15, 2020

ADVANCED EMERGENCY PROCEDURES (MANDATORY SESSION)
with Anne Sorrentino, DC, DACBSP®

April 18-19, 2020

ADVANCED CASE CORRELATIONS
with William Moreau, DC, DACBSP®, Dustin Nabhan, DC, DACBSP® and
Chad J. Prusmack, MD - Neurosurgeon

HOURS:

SAT: 8:30 AM - 6 PM

SUN: 8:00 AM - 12 PM

FEE: \$3,950 for 100 live hours and 100
online hours. Payment plans are available.

LOCATION:

Resilience Code
99 Inverness Dr E, Suite 100
Englewood, CO 80112
<https://www.myresiliencecode.com/>



EASY WAYS TO REGISTER:

- ▶ Call DConline at 712-260-2507
- ▶ Use the attached registration form

CEUS provided by SCU.



3578 Hartsel Drive, Unit E #414
Colorado Springs, CO 80920
Phone: 712-260-2507 | Fax: 719-494-8012
Email: dconline@dconline.org

**For additional information on these
engaging programs, call 712-260-2507
or visit www.dconline.org.**



DConline™ FAX BACK REGISTRATION FORM

Please fill out the below information and email to dconline@dconline.org or **Fax** this form to 719.494.8012
or

Mail to DConline, 3578 Hartsel Dr. Unit E #414, Colorado Springs CO 80920.

Please Print neatly so we can effectively help you.

NAME:

STREET ADDRESS:

CITY:

STATE:

ZIP CODE:

Phone Number:

E-mail Address:

(You MUST enter a valid email address)

Course Title(s):

Your **enrollment ID** will be assigned to you by DConline and sent to the **e-mail address** listed ABOVE.

Credit Card (Master Card, VISA or American Express)*

Name on Card:

CC Number:

Expiration Date:

CVV code

Print Credit Card billing address below **ONLY** if different than above address.

*DConline™ will NOT retain credit card information. This form is shredded after posting tuition charges.

Thank you for using DConline for your educational requirements.

We appreciate you and your business.