



Burn Surge Training Course Registration Form

PRE-REQUISITE: ABLIS or ABLIS NOW

****Please Type or Print *clearly*****

Name:

Credentials:

Institution/Hospital:

E-mail address: *(please use your work email)*

Healthcare Coalition Region you are from?

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Please place a check by the training date you wish to attend:

- August 8, 2023
- November 14, 2023

****Please email completed form to Sarah Parviz
separviz@med.umich.edu**