

SLP Endoscopix – 2-Day Adult FEES Course Registration Form



Course Title: Fundamentals of Flexible/Fiberoptic Endoscopic Evaluation of Swallowing (FEES) in Adults

Location: 520 Ellesmere Rd Suite 402, Scarborough, ON M1R 4E6

Dates: January 24 & 25, 2026

Time: 8:00 am – 4:45 pm

Cost: \$850.00 CAD

Participant Information

Full Name: _____

Professional Title: _____

Organization/Institution: _____

Previous Experience with FEES:

☐ None ☐ Some ☐ Experienced

Address: _____

City: _____ **Province/State:** _____ **Postal/ZIP Code:** _____

Phone Number: _____

Email Address: _____

Emergency Contact Name & Phone: _____

Payment Information

Payment Method (check one):

☐ Credit Card (Visa/MasterCard/Amex)

☐ E-transfer (ilana@slpendoscopix.com; include participant name in the notes section)

Name on Card: _____

Card Number: _____

Expiry Date: _____

CVV: _____

Total Amount Paid: \$ _____

Signature: _____

Submission Instructions & Cancellation Policy

Please **fax completed registration forms** to: 416-981-7733 or **email a scanned copy** to: ilana@slpendoscopix.com. The registration **deadline is December 31, 2025**.

Note: Enrollment is limited to **12 participants**. Registrations will be confirmed in the order received. Individuals not enrolled due to capacity limits will be notified via email.

Cancellations: All cancellation requests must be submitted in writing. Cancellations received **15 days or more** before the course date will be refunded in full, minus a \$50.00 administrative fee. Cancellations made **between 5 and 14 days** prior to the course date will receive a **50% refund**, less the administrative fee. Unfortunately, **no refunds** can be provided for cancellations made **within 4 days** of the course date.

For questions, contact **Ilana Klain, M.Sc., CCC-SLP**

Phone: 416-356-3195 | Email: ilana@slpendoscopix.com