

# EXCELL NURSING REVIEW Registration Form

## REVIEW CLASS SCHEDULES (Please check one):

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
E-mail \_\_\_\_\_

- ☐ Burbank, CA (Jan 31 to Feb 8, 2020)
- ☐ Sunnyvale, CA (Feb 22 to Mar 1, 2020)
- ☐ Chicago, IL (Mar 16 to 31, 2020)
- ☐ Burbank, CA (Apr 12 to 20, 2020)
- ☐ Chicago, IL (May 18 to June 3, 2020)
- ☐ Sunnyvale, CA (June 17 to 25, 2020)

**Review Fee: \$690.00 (CA), \$590.00 (IL)**

✂----- Please cut here and mail -----✂



### HOW TO REGISTER BY MAIL:

1. Complete the registration form.
2. Make Cashier's Check or Money Order payable to:

**Excell Professional Services, Inc.**

3. Mail the registration form and your payment to:

**Excell Professional Services, Inc.  
4N 703 Mountain Ash Dr., Wayne, IL 60184**

**WE DO NOT ACCEPT PERSONAL CHECKS.**