



Continuing Professional Development CPD 2015 for Remedial Massage Therapists

Name _____ Signature _____

CMASA _____

Address _____

State _____ Postcode _____

Email _____

Period 1st December 2014 to 30th November 2015

As one of the standards for Health fund rebate eligibility, a minimum annual requirement of 20 hours (20 CPD) . To be completed and sent to CMASA National Office before 31st December 2015.

Please send this record back to CMASA before 31st of December 2015 by

1/ Preferably, by **email at CMASAtcm@hotmail.com**

2/ Mail to **1F 23 John Street Cabramatta 2166 NSW**

3/ Fax : (02) 9727 8981

CHINESE MEDICINE & ACUPUNCTURE SOCIETY OF AUSTRALIA LTD

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P.O. Box 1323 Burwood NSW 1805

Phone: (02) 9727 6831

Website: www.australiantcm.com.au

2015 CPD RECORD

TOTAL CPD :

Name: _____

CMASA _____

Date _____ Time _____ Organiser:	Topic: Reflection:	CPD points
Date _____ Time _____ Organiser:	Topic: Reflection:	CPD points
Date _____ Time _____ Organiser:	Topic: Reflection:	CPD points
Date _____ Time _____ Organiser:	Topic: Reflection:	CPD points

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