



### **Onsite Proposal Request For Information**

Thank you for your interest in onsite training with Maverick Medical Education. In order for us to get you a proposal for services, additional information is needed. Please complete this form and return to [dena@maverickmeded.com](mailto:dena@maverickmeded.com). Once received, details will be provided within 5-7 days on proposed services and requirements along with the cost to provide the detailed services. Please contact Dena Gaskin at the above email with any questions you might have.

Group Name:	
Contact Person:	
Mailing Address:	
Contact Email Address:	
Contact Cell Phone #:	
Approximate # of Participants (minimum of 6 participants required for onsite training):	# of CRNAs: # of MDAs: # of Other Providers (please detail):
Services Requested: <i>(Each of these courses are separate courses and have different cadaver requirements.)</i>	<input type="checkbox"/> USGRA Essential Techniques (Interscalene, Supraclavicular, Axillary Femoral, Popliteal Sciatic, Adductor Canal, Fascia Iliaca, Infraclavicular)  <input type="checkbox"/> USGRA Advanced Techniques (Erector Spinae, Paravertebral, PECS 1 & 2, Quadratus lumborum, Suprascapular, Lateral & Subcostal TAP)  <input type="checkbox"/> Basic Point-of-Care Ultrasound (Cardiology Assessment, Pulmonary Assessment, Fundamentals of Ultrasound, Cardiology)
Facility Name and Address where training would occur: <i>(USGRA training requires the use of cadavers and facility must be authorized this use, i.e. hospital OR or anatomy lab)</i>	
# of Ultrasound units available for use during training at facility?	
Nearest major airport:	

10592 County Road 175  
 Iola, TX 77861  
[www.maverickmeded.com](http://www.maverickmeded.com)