

**St. Anthony's Hospital CME Registration Form**  
**Advanced Rhinology 2016: Endoscopic Surgery & Allergy**

**November 3-5, 2016, St. Petersburg, FL**

**Early Registration Discount:** The following registration rates apply to all registration payments on or before **August 1<sup>st</sup>, 2016**. \*After that date all fees listed in table below increase by \$200.00.\*

**Early Registration Fees Include:** The electronically downloaded syllabus, USB key/jump drive with syllabus loaded, notepad, local maps, breakfast, lunch and breaks on each day and the dinner symposium on November 3<sup>rd</sup>, 2016. RSVP for attending dinner is required on this form. Registrants should plan to download/print their syllabus at home and bring it to the course or bring their personal laptops for electronic use of their syllabus with the supplied USB key/jump drive. Your email address is required below for secure syllabus download. Requests for attendance at specific Lab Session are accepted on first come first serve basis with paid registration.

Amount	Number	
\$ 650.00*	_____	Physician: Lecture Only*
\$1750.00*	_____	Physician: 2 Hands-on Cadaver Lab Sessions for 2 sides of dissection (Left & Right) & Lectures*
\$1350.00*	_____	Physician: 1 Hands-on Cadaver Lab Session for 1 side of dissection (Left <b>OR</b> Right) & Lectures*
\$1550.00*	_____	Resident: 2 Hands-on Cadaver Lab Sessions & Lectures* (Program director letter required)
\$ 500.00*	_____	Resident, NP, PA, allied health professional: Lectures only* (Program director letter required)
\$ 85.00	_____	Dinner symposium for non-registered guests on 11/3/16 at 7pm
\$ 85.00	_____	Gastroenterologists: Dinner Symposium: "Extra-Esophageal Reflux—Diagnosis & Management" 2 CME credits
\$ 20.00	_____	Neurologists: "Sinus Headache or Migraine? Or Both?" 2.5 CME credits (Ask about dinner symposium following)
<b>Total =</b>	<b>\$_____</b>	<b>Amount of Payment</b>

**Registration**

Registration is available by 3 methods. Registration is completed and your space is reserved once full payment is received. Purchase orders not accepted. Hotel reservations should be made separately through the Hilton Carillon Park Hotel. See prior page. Please choose **one** method below to register for this CME course:

**Call** toll free phone: **(844)-818-2358**

**Fax** this completed registration form to: **(727) 825-1354**

**Mail** this completed registration form with a check payable to "St. Anthony's Hospital CME" to CME Dept., St Anthony's Hospital 1200 7<sup>th</sup> Avenue North, MS# 2034, St Petersburg, FL 33705. It must be received before October 1<sup>st</sup>, 2016.

First name:		Last Name:	
Degree:		Specialty:	
Address:			
City:	State:	Zip:	Country:
Phone:	Fax:	Email:	
How did you hear about this symposium?    Direct Mail    Email    Journal    Other:			
<b>Nov 3rd Dinner Symposium RSVP:</b>		Yes	No

**Charge the following credit card account:**

( ) American Express ( ) Discover ( ) MasterCard ( ) Visa

Billing Address (if different from above):

Card Number: \_\_\_\_\_

\_\_\_\_\_

Expiration date (month/year): \_\_\_\_\_

Street: \_\_\_\_\_

Card Security Code: \_\_\_\_\_

City: \_\_\_\_\_

Name on Card: \_\_\_\_\_

State/Province: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_

Signature: X \_\_\_\_\_