

REGISTRATION

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ASAPS/ASPS The Artful Approach to Cosmetic Medicine

August 24 - 26, 2018 • CME Directly Provided by ASAPS

First Name: _____ ASAPS/ASPS ID#: _____

Last Name: _____

Badge Name (if different from above): _____

Street Address: _____

City: _____ State: _____

Zip/Postal Code: _____ Country: _____

Phone: _____ Fax: _____

Email: _____

(Used to communicate Symposium updates)

Check here if, under the American Disabilities Act, you require specific aids or devices to fully participate in this symposium

Audio

Visual

Symposium Registration

18.5 AMA PRA Category 1 Credits*

	On or Before July 24, 2018	On or After July 24, 2018	Subtotal
*ASAPS or ASPS Active Member and Candidate for Membership	\$1,450	\$1,650	\$ _____
*Guest Physician	\$1,850	\$2,050	\$ _____
ASAPS/ASPS Life Member/Resident	\$700	\$800	\$ _____
<i>(Residents must provide letter of verification from chief of plastic surgery)</i>			
**Allied Health/Office Personnel	\$1,000	\$1,200	\$ _____
<i>(Must provide letter verifying employment by an ABPS-certified plastic surgeon)</i>			
Spouse/Accompanying Guest.	\$250	\$250	\$ _____

*** Bring your allied professional and save \$500 on their registration.**

Total Enclosed: \$ _____

****Bring your doctor employer and save \$500 on your registration.**

By registering for this event: You will be receiving additional communications about this event.

Non-EU/UK registrants will also be receiving information about future events and/or products and services.

For EU/UK registrants: Pursuant to the GDPR, do you wish to receive information about future events and/or products and services? Yes No

Payment

Check Payable to ASAPS (US Funds ONLY) is enclosed MasterCard Visa American Express

Account Number: _____

Expiration Date: _____ Security Code: _____ Billing Address Zip Code: _____

Card Holder Name: _____ Signature: _____

Send Payment to:

The Aesthetic Society (ASAPS) • 11262 Monarch Street, Garden Grove, CA 92841 USA • Fax: 562.799.1098 • Phone: 562.799.2356

Refunds not considered unless a written request is emailed to Victoria@surgery.org by July 24, 2018, or mailed to the ASAPS Central Office and postmarked by July 24, 2018. Refunds will be subject to a minimum 15% administrative fee.

*Program and hours subject to change.