



ANNUAL MEETING

OCTOBER 18-20, 2018 • THE HILTON ATLANTA

Held simultaneously with the American College of Osteopathic Surgeons

REGISTRATION FORM

Online registration is available at www.aoao.org

PLEASE PRINT

First Name: _____ Last Name: _____ Degree: _____

Address: _____

City: _____ State: _____ Zip: _____

*Email Address: _____ Phone Number (Home Work): _____

AOA Number: _____ Nickname for Badge: _____

Are you in a fellowship? Yes No If yes, where? Location: _____ ACGME Accredited? Yes No

City: _____ State: _____ Specialty: _____ Year complete: _____

All conference registration confirmations and important updates will be sent via email. Please make sure to set your email account to accept emails from societyhq.com and aoao.org.

Fee Schedule (*Registration fee includes coffee breaks, continental breakfasts, lunches, receptions, and e-syllabus*)

| AOAO Member Registration | On or before 9/27/18 | After 9/27/18 | Non-Member Registration | On or before 9/27/18 | After 9/27/18 |
|--|-------------------------|------------------|---|-------------------------|------------------|
| <input type="checkbox"/> Active Member/Military | \$650 | \$750 | <input type="checkbox"/> Non-Member Physician | \$1,050 | \$1,150 |
| <input type="checkbox"/> Life/Retired/Disabled - No CME | \$150 | \$175 | <input type="checkbox"/> Non-Member Allied Health | \$275 | \$325 |
| <input type="checkbox"/> Life/Retired/Disabled - With CME | \$450 | \$475 | <input type="checkbox"/> Non-Member Resident/Fellowship Training - No CME | \$425 | \$475 |
| <input type="checkbox"/> Associate - With CME | \$650 | \$750 | <input type="checkbox"/> Students - No CME | \$20 | \$30 |
| <input type="checkbox"/> Allied Health Professional | \$175 | \$225 | | | |
| <input type="checkbox"/> Candidate Resident/Fellowship Training - No CME | \$225 | \$275 | | | |
| <input type="checkbox"/> SAOAO Student Members - No CME | \$10 | \$20 | | | |
| <input type="checkbox"/> Guest Badge (Exhibits, Lunches and Receptions) | | | | \$150 | \$200 |
| Names for Guest Badge(s): _____ | | | | | |

AOAO/ACOS Welcome Reception* - Wed., October 17, 6:00 pm

Check here if you plan to attend. No Fee. *Held at the JW Marriott Atlanta

CO*REMS Session - Thu., October 18, 2018, 7:00 am

Check here if you plan to attend. Pre-registration required. No Fee.

Exhibitor Reception - Thu., October 18, 2018, 6:00 pm

Check here if you plan to attend. No Fee.

AOAO Foundation Fundraising Dinner - Thu., October 18, 2018, 7:00 pm

Check here if you plan to attend. \$200 per person. # Tickets _____

Awards Cocktail Reception - Friday, October 19, 2018, 5:30 pm

Check here if you plan to attend. No Fee.

Program Directors Breakfast - Sat., October 20, 2018, 7:30 am

Check here if you plan to attend. Directors only. No Fee.

TOTAL AMOUNT ENCLOSED:\$ _____

Personal Check (Payable to AOA) VISA MasterCard AMEX Discover

Card Number: _____ Expiration Date: _____

Credit Card Billing Address: _____ Credit Card Zip Code: _____

CVV Security Code: _____ (3-digit # in signature box on the back of VISA/MC or 4-digit # on front of AMEX card above the card #).

Signature: _____ Printed Name on Card: _____

Refund Policy: A full refund through September 27, 2018; 80% refund from September 28 – October 5, 2018 less a \$25 service charge; no refunds after October 5, 2018. Refunds will be determined by date written request is received by the headquarters office. Please allow two weeks for your registration to be processed and confirmation to be received. **AOAO Tax I.D. #386073712**

Mail or fax this form to AOA at: 2209 Dickens Road • Richmond, VA 23230-2005 • PHONE (804) 565-6370 • FAX (804) 282-0090