



2018 Summer Conference

June 30, 2018

X-Ray Assistant
Registration Form

Assistant Name (Please use a separate form for each registrant.) _____

Physician/Employer _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Assistant Email (All related study materials will be sent to this email) _____ PXA # _____

Registration Fee

The X-Ray Assistant Program consists of an 8-hour course on June 30, 2018 and Examination on July 1, 2018.

X-Ray certification status

Before 6/22/18

- Initial course for certification by the Florida Board of Podiatric Medicine \$175.00
- Recertification (Florida Board of Podiatric Medicine Certificate PXA # _____) \$175.00

Total: \$ _____

Pre-registration closes June 22, 2018; after that date, you must register on-site. Cancellations will be accepted through June 22, 2018.

Payment

Visa Account Number _____

Mastercard Expiration Date _____ CVV Security Code _____

American Express Cardholder Signature _____

Billing Address (if different from above) _____

Check Enclosed **Make checks payable to Florida Podiatric Medical Association.** Return completed registration form with payment to:

Mail: Florida Podiatric Medical Association, 410 North Gadsden Street, Tallahassee, Florida 32301

Email: knelson@fpma.com

Fax: (850)681-0899

Hotel

Hyatt Regency Coconut Point Resort and Spa

5001 Coconut Road
Bonita Springs, Florida 34134
coconutpoint.regency.hyatt.com

Go to Conference Web page for more info:

https://www.fpma.com/fpma_2018_summer_conference.php

Must book by June 7, 2018