

On-Site Physicians' Registration Form

SAM 2017

Registrant Information: SAM 2017 Physicians' Registration is now closed. Please use this form to register on-site.

FPMA Science &
Management Symposium
January 18 - 22, 2017
Hilton Orlando
Orlando, Florida

Complete one form per registrant. Your first and last name, as it appears below, will be printed on your SAM 2017 name badge. You must be registered for the entire program to attend any portion of the program. Some workshops and events may require separate fees.

Last Name _____ First Name _____ Degree (i.e., DPM) _____

Address _____ City _____ State _____ Zip _____

Daytime Phone _____ Cell Phone for On-site Contact _____ Email _____

Comments/Special Needs _____ License # _____

General Sessions Includes general lectures, coffee breaks, luncheons, and Exhibit Hall Access	FPMA Member	FPMA Life Member	APMA Member	APMA Life Member	Non-APMA Member	Student	Resident (APMA/FPMA)	Resident (Non-APMA/Non-FPMA)
Payment Received On-Site	<input type="checkbox"/> \$100	<input type="checkbox"/> \$235	<input type="checkbox"/> \$575	<input type="checkbox"/> \$350	<input type="checkbox"/> \$1,075	<input type="checkbox"/> \$25	<input type="checkbox"/> \$75	<input type="checkbox"/> \$175

Guest Badges Allows admittance to Exhibit Hall for registered attendee guests and children only. No charge for children.	\$25 each x _____ badge(s) = \$ _____
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Total Due

Payment

Check made payable to FPMA

Credit Card (*complete section below*)

Visa MasterCard American Express

Credit Card Number _____ Exp. Date _____ Security Code _____

Name On Card _____ Cardholder's Signature _____

Billing Address if Different from Above _____ City _____ State _____ Zip _____

For more information about SAM 2017, visit the SAM 2017 web page on the FPMA website at www.fpma.com.