

PODIATRIC MEDICAL ASSISTANT IN-PERSON MEETING REGISTRATION FORM

The registration on this page is for assistants attending The National only. Please note that the assistants' educational program is being provided only for in-person attendees. You may also register online to attend the meeting by visiting www.apma.org/thenational. See the reverse side of this form for a separate registration, schedule, and fee for the review courses and certification examinations offered by ASPMA in conjunction with The National.

YOUR INFORMATION

Name _____ First Name for Badge

Name _____ First Name for Badge

Name _____ First Name for Badge

Name _____ First Name for Badge

DPM Employer _____ APMA Member? Yes No

Address _____

City/State/Zip Code _____

Office Phone _____ Fax _____

Email Address _____

ANNUAL SCIENTIFIC MEETING REGISTRATION FEE

Each Assistant **\$149**

Number of assistants registered _____

TOTAL	\$ _____
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*(Note: Assistants' **examination** fees must be paid separately and may not be included in this total.)*

PAYMENT

Total Registration Amount \$ _____

Registration will not be processed unless accompanied by full payment.

Payment type (check one):

Check enclosed in US dollars (payable to APMA, Inc.)

MasterCard VISA American Express Discover

_____ Credit Card Number

_____ Expiration Date Security Code

_____ Name on Card

_____ Authorized Signature Date

_____ Day Phone of Cardholder

Additional Information

Per the Americans With Disabilities Act of 1990, check here if you have a disability and may require accommodations to participate fully. Please describe:

PLEASE NOTE:

- Educational topics are subject to change as the program schedule develops.
- All registration fees must be paid in advance.
- Full payment must be received with your registration form, or the total must be recorded as part of the sponsoring DPM's registration. Registrations without complete payment will not be processed.
- Registration for The National includes educational sessions (unless otherwise noted), exhibit hall entry, and refreshment breaks. Note: There is a separate fee for the examinations and review courses; they are not included in the fee schedule on this page.
- A confirmation of registration will be sent to you by mail or email within five to 10 business days after receipt.
- Cancellation policy: Cancellation requests must be made in writing. Cancellations received prior to the start of the event will receive a refund minus a \$50 service fee. No refunds are available for no-shows or cancellations received after the start of the event. Refunds will be remitted after the close of the event.

Mail, email, or fax your completed registration to:
 American Podiatric Medical Association
 9312 Old Georgetown Road, Bethesda, MD 20814-1621
 Fax: 301-530-2752 | Email: registration@apma.org

2021 Comprehensive Review Courses and Certification Examinations

THE ASPMA COMPREHENSIVE REVIEW COURSES

The review courses are given in two categories: clinical and radiology. The examinations will also be given in these two categories. These courses are "closed" courses offered only to ASPMA members who have preregistered to sit for the certification examinations. For more information on becoming a member of ASPMA, visit www.aspma.org and click on "Membership."

The review courses are on **Thursday, July 29**, as follows:

8:00 a.m.–2:00 p.m.	Clinical
2:00–5:00 p.m.	Radiology

The examinations are on **Friday, July 30**, as follows:

8:00–9:30 a.m.	Assistants taking radiology examination only
8:00–11:00 a.m.	Assistants taking clinical examination only
8:00 a.m.–1:00 p.m.	Assistants taking radiology and clinical examinations

Examination confirmations will be checked for verification.

TO REGISTER FOR THE ASPMA CERTIFICATION EXAMINATIONS

ASPMA members are required to submit the completed registration form to the right and the examination fee, postmarked on or before June 28. A late fee will be added for those registering after the deadline. Only ASPMA members are eligible to attend the courses and sit for the certification examinations, clinical or radiology.

You must also be registered for the Assistants' Educational Program at the APMA 2021 Annual Scientific Meeting (The National) to be eligible to take the examinations.

STUDY MANUALS

Clinical Examination

The fee for the clinical examination includes *The Comprehensive Guide to Podiatric Medical Assisting*, 6th edition. As soon as you register to take the examination, the study guide will be shipped to you.

Radiology Examination

The fee for the radiology examination includes *Radiology for the Podiatric Practice*, 2nd edition. As soon as you register to take examination, the study guide will be shipped to you.

Please complete the form below and mail with your check made payable to ASPMA Qualifying and Examining to:

ASPMA
 Karen Keathley, PMAC
 109 South First Street | Itasca, IL 60143-2114
 Phone: 888-88ASPMA

A \$25.00 fee will be charged for all returned checks.

YOUR INFORMATION

ASPMA Member Name

ASPMA Membership Number

Which Examination(s) You Will Take (Clinical, Radiology, or Both)

DPM Employer

Office Address

City/State/Zip Code

Office Phone Mobile Phone (Required)

Fax (Required)

Email Address (Required)

CHECKLIST FOR REVIEW COURSES AND CERTIFICATION EXAMINATIONS

- Completed form
- \$400 **Clinical** examination fee
- \$450 **Clinical** examination fee*
- \$400 **Radiology** examination fee
- \$450 **Radiology** examination fee*
- \$800 **Clinical and radiology** dual exam fee
- \$850 **Clinical and radiology** dual exam fee*

*Includes \$50 late fee if postmarked after June 28.