



THE NATIONAL

APMA ANNUAL SCIENTIFIC MEETING
SALT LAKE CITY | JULY 11-14, 2019

PODIATRIC PHYSICIAN REGISTRATION FORM

ABOUT YOUR INFORMATION: All correspondence concerning The National originating from APMA or supplier vendors who purchase our registrant mailing list will be sent to the address provided below. *Industry representatives who wish to attend the meeting should contact APMA's department of Development and Corporate Relations at 301-581-9200.*

YOUR INFORMATION

APMA Member Number

Last Name

Formal First Name

Nickname (or First Name) for Badge

Address

City/State or Province/Country

Zip Code or Postal Code

Daytime Telephone

Fax Number

Email Address

NPI Number

(Note: Physicians' NPI numbers are publicly available. APMA collects this information so that it can be used as needed, e.g., to satisfy Open Payment reporting requirements.)

YOUR GUEST'S INFORMATION

(If you have additional guests, please attach a separate sheet.)

Last Name

Formal First Name

Nickname (or First Name) for Badge

EDUCATIONAL PROGRAM AND SPECIAL SESSIONS

Check all of the sessions you will attend; all programs on this page are included free of charge with the registration fee. *(See reverse for workshops.)*

THURSDAY / JULY 11, 2019

- General Lectures: Morning Sessions
- General Lectures: Afternoon Sessions
- Breakfast Symposium 7:00-8:30 a.m.
- Non-CECH Lunch Symposium 1: Non-Opioid Pain Management* *(Recro Pharma, Inc.)* 12:00-1:00 p.m.
- Non-CECH Lunch Symposium 2: Gout* *(Horizon Pharma, Inc.)* 12:00-1:00 p.m.

FRIDAY / JULY 12, 2019

- General Lectures: Morning Sessions
- Affiliated Organizations Track (Afternoon)
- Breakfast Symposium 7:00-8:30 a.m.
- Non-CECH Lunch Symposium 1: Skin Infections* *(Melinta Therapeutics)* 12:00-1:00 p.m.
- Non-CECH Lunch Symposium 2: Onychomycosis and Tinea Infections* *(Ortho Dermatologics)* 12:00-1:00 p.m.

SATURDAY / JULY 13, 2019

- General Lectures: Morning Sessions
- General Lectures: Afternoon Sessions
- Breakfast Symposium 7:30-9:30 a.m.
- Students' and Residents' Program 10:00 a.m.-12:00 p.m.
- Non-CECH Lunch Symposium 1: TBD 12:00-1:00 p.m.
- Poster Abstracts Symposium 1:00-2:00 p.m.
- Non-CECH Lunch Symposium 2 *(Pending)* 12:00-1:00 p.m.

SUNDAY / JULY 14, 2019

- General Lectures: Morning Sessions
- General Lectures: Afternoon Sessions
- Breakfast Symposium 7:00-8:30 a.m.

**Non-CECH Lunch Symposia are ticketed events limited to 100 participants each.*

ANNUAL MEETING REGISTRATION FEES

(Circle appropriate amount)

	Jan 7- March 1	March 2- June 17	After June 17
APMA Member	\$399	\$499	\$599
APMA Life Member	\$199	\$299	\$299
DPM (Non-APMA Member)	\$799	\$799	\$799
Health-Care Professional	\$799	\$799	\$799
APMA Student/Resident/Fellow Member	Complimentary		
APMA Member Young Physician	\$299	\$299	\$299
APMA Member Residency Director	\$299	\$299	\$299
APMA Member Federal Services or Active Duty Military <i>This rate is available only to members of the Federal Services component society.</i>	\$299	\$299	\$299

HANDS-ON WORKSHOPS

(Circle appropriate amounts)

Workshop 1: Wound Care Friday, July 12, 2019 1:30-3:30 p.m. <i>Limited to 24 attendees</i>	\$249
Workshop 2: Ultrasound Friday, July 12, 2019 3:30-5:30 p.m. <i>Limited to 24 attendees</i>	\$249
Workshop 3: Ankle Arthroscopy Saturday, July 13, 2019 1:00-4:00 p.m. <i>Limited to 16 attendees</i>	\$349

ADDITIONAL EVENT

Podiatry Management Hall of Fame Induction Lunch

Saturday, July 13, 12:00-1:00 p.m.

Number of tickets: _____ at \$75 each \$ _____

TOTAL	\$ _____
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PAYMENT

TOTAL REGISTRATION AMOUNT

\$ _____

Payment type (check one):

Registration will not be processed unless accompanied by full payment.

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

MasterCard

VISA

American Express

Discover

Credit Card Number (please print clearly)

Expiration Date

Security Code

Name on Card (please print clearly)

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.
- Payment must be received with your registration form. Registrations without complete payment will not be processed.
- Registration for The National includes educational sessions (unless otherwise noted), exhibit hall entry, and refreshment breaks.
- A confirmation of registration will be sent to you by fax, mail, or email.
- Written requests for registration refunds must be postmarked on or before June 17, 2019. Registration fees are refunded less a \$50 processing fee. All refunds will be issued after the meeting has occurred.
- No refunds will be made after June 17, 2019. Refunds are not granted to no-shows.

Mail, email, or fax your completed registration to:

American Podiatric Medical Association, Annual Meeting Office | 9312 Old Georgetown Road, Bethesda, MD 20814-1621
 Fax: 301-530-2752 | Email: membership_ask_apma@apma.org