

REGISTRATION FORM

NAFP 44th Annual Winter CME Meeting

Register online at nvafp.com

January 22-26, 2012

TO REGISTER complete this form and mail or fax with payment to **NAFP, 326 W. Liberty St., Reno, NV 89501**. Phone: 775-826-5100, Fax: 775-826-4475, E-mail: nafpreno@aol.com. You can also register online at **nvafp.com**. To make hotel reservations, visit **nvafp.com** or call Harrah's Lake Tahoe directly, before January 6, 2012, at 800-455-4770. Identify yourself with the group code: *Harrah's Lake Tahoe, SO1NVDC* to receive the special group rates.

PLEASE PRINT ALL INFORMATION

AAFP ID Number: _____

Name _____
First M.I. Last Name Badge - If different

Degree: MD ___ DO ___ RN ___ LPN ___ PA ___ NP ___ Other ___

Address _____

City State Zip

Phone () _____ Fax () _____ E-mail _____

Spouse/Guest (if attending) _____
First M.I. Last

- _____ Please check this line if you prefer to have your syllabus on a disc in place of a printed syllabus.
- _____ Please check this line if you have physical or dietary requirements which require accommodation in order to fully participate in this activity. Please attach a description of your specific needs. NOTE: Additional fees may be charged for specialty menus.

Registration Fees:

Registration fee includes all lectures and workshops (Sun-Thu); daily breakfast, lunch and afternoon refreshment breaks; admission for two to the evening receptions in the exhibit hall; and the Wednesday evening dinner/dance.

	Postmarked on or before 12/1/11	Postmarked after 12/1/11
Physician, Non Nevada AFP Member	\$550	\$650
Nevada AFP Active Member	\$400	\$450
Allied Health Professionals & Retired Physicians (Nurse, PA, etc.)	\$300	\$350
Resident, Non Nevada AFP Member	\$250	\$250
NAFP Resident/Student Member	\$200	\$200
Special Local's Day Rate - This rate is for Nevada Health Care Professionals - SUNDAY ONLY	\$125	\$125
Daily Registration - SPECIFY DAY(S):	\$150/day	\$200/day

OPTIONAL FEES:

	Meeting Attendees	Non-attendees
Pre-Conference Group SAM Learning Session (Vulnerable Elderly) - Sat., Jan. 21	\$75	\$150
Group SAM Learning Session (Diabetes) - Tue., Jan. 24	\$75	\$150
Medical Ethics ONLY - 2 credits	n/a	\$75
4th Annual Poker Tournament - Tue., Jan. 24	\$70	\$70

SKI/SNOWBOARD LIFT TICKETS:

Daily Ski Lift Tickets for Heavenly Mountain Resort & Northstar (call 775-826-5100 for multi-day lift tickets)..... @ \$77

TOTAL AMOUNT ENCLOSED \$

REFUND POLICY: 100% (less \$50 processing fee) will be refunded through January 1, 2012. No refunds after that date.

PAYMENT INFORMATION

_____ Check enclosed, payable to **NAFP** _____ MasterCard/Visa _____ American Express _____ Discover

Card Number: _____ Exp. Date: ____/____ Security Code: _____

Name on Card: _____ Signature: _____

Billing Address: _____ Billing Zip Code: _____

Please mail or fax completed form with payment to **NAFP, 326 W. Liberty St., Reno, NV 89501**
OR register online at <http://nvafp.com/shop/>

Phone: 775-826-5100

Fax: 775-826-4475