

2019 Metabolic and Endocrine Disease Summit (MEDS)

NOTE: Group registrations MUST be submitted together for group prices.

Prices below for reference only, please indicate in payment section when completing registration on next page

MEDS WEST July 31 – August 3, 2019 Wyndham San Diego Bayside				
SINGLE REGISTRANT				
	Until May 10	Until June 28	After June 28	Onsite
NPs/ PAs /Other Clinicians	\$355	\$395	\$495	\$545
PCMG / ASEPA Members	\$325	\$345	\$395	\$445
2 or MORE REGISTRANTS				
	Until May 10	Until June 28	After June 28	Onsite
NPs / PAs / Other Clinicians	\$305	\$325	\$375	\$445
OPTIONAL WORKSHOP				
	Until May 10	Until June 28	After June 28	Onsite
NPs / PAs / Other Clinicians	\$85	\$95	\$125	\$150

MEDS West Cancellation Policy:

A refund less a \$50 administrative fee as follows: You may cancel your registration using our online registration system prior to July 1, 2019. After July 1, 2019 no refunds will be granted. After the refund date, you have two options: you can transfer your registration to another party using our online registration system, or receive a credit in the amount you paid less a \$50 administrative fee to be applied to your registration for next year's conference. Refunds will not be issued to no-shows.

Global Academy for Medical Education is not responsible for nonrefundable, nontransferable airline tickets or hotel accommodations purchased for attendance at this course. The registration fee covers attendance to the scientific meeting, continental breakfasts, coffee breaks, lunches when provided, and exhibits.

MEDS EAST October 2-5, 2019 Caribe Royale, Orlando, FL				
SINGLE REGISTRANT				
	Until May 10	Until August 30	After August 30	Onsite
NPs/ PAs /Other Clinicians	\$355	\$395	\$495	\$545
PCMG / ASEPA Members	\$325	\$345	\$395	\$445
2 or MORE REGISTRANTS				
	Until May 10	Until August 30	After August 30	Onsite
NPs / PAs / Other Clinicians	\$305	\$325	\$375	\$445
OPTIONAL WORKSHOP				
	Until May 10	Until August 30	After August 30	Onsite
NPs / PAs / Other Clinicians	\$85	\$95	\$125	\$150

MEDS East Cancellation Policy:

A refund less a \$50 administrative fee as follows: You may cancel your registration using our online registration system prior to September 3, 2019. After September 3, 2019 no refunds will be granted. After the refund date, you have two options: you can transfer your registration to another party using our online registration system, or receive a credit in the amount you paid less a \$50 administrative fee to be applied to your registration for next year's conference. Refunds will not be issued to no-shows.

Global Academy for Medical Education is not responsible for nonrefundable, nontransferable airline tickets or hotel accommodations purchased for attendance at this course. The registration fee covers attendance to the scientific meeting, continental breakfasts, coffee breaks, lunches when provided, and exhibits.

RETURN THIS FORM TO:
 MEDS c/o Global Academy for Medical Education
 7 Century Drive, Suite 301, Parsippany, NJ 07054
 fax: 201-822-6114 email: MEDS@globalacademycme.com

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Print additional pages as needed

DATE / VENUE (Please check date / venue that applies)

- July 31-Aug 3, 2019 at Wyndham San Diego Bayside (MEDS WEST)
 October 2-5, 2019 at Caribe Royale, Orlando, FL (MEDS EAST)

REGISTRATION INFORMATION

First Name: _____ Last Name: _____
NPI / ME or License Number: _____
Degree: NP PA RN CNS CDE MD DO Other Clinician _____
Are you: PCMG Member ASEPA Member
Practice Name/Affiliation: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email Address (for confirmation): _____
Specialty: _____
Years in Practice: 1-5 6-10 11-15 16-20 20+
Type of Practice: Office Hospital Clinic Other _____
How did you learn about MEDS: Postcard by mail Email invitation Ad in journal Online banner ad
 Colleague Social Media Other _____

REGISTRATION OPTION (Please check option below & note price from attached page)

- NPs / PAs / Other Clinicians
 PCMG / ASEPA Members
 Insulin Workshop (optional)

TOTAL REGISTRANTS _____ YOUR PRICE \$ _____

PAYMENT INFORMATION

All fees must be paid in advance and accompany this registration form. Forms received without payment will not be processed. Sorry we cannot bill. (Federal Tax ID #27-0893910). NOTE: Group registrations MUST be submitted together for group prices.

- Individual registration, please charge card below
 Part of group, please charge card below Part of group, please charge entire group to same card

Additional Info / Instructions: _____

- AMEX MasterCard Visa Check enclosed. Payable to:
Global Academy for Medical Education (GAME) / MEDS

Credit card number _____ Exp. Date _____

Name on card _____ Signature _____

RETURN THIS FORM TO:
MEDS c/o Global Academy for Medical Education
7 Century Drive, Suite 301, Parsippany, NJ 07054
fax: 201-822-6114 email: MEDS@globalacademycme.com