

NWOOA FALL PRIMARY CARE UPDATE 2012 REGISTRATION FORM

November, 2, 3, and 4, 2012

Return this form by mail or fax to: Northwest Ohio Osteopathic Association
10539 Avenue Rd., Perrysburg, OH 43551 Fax to: 419-872-7544 Phn: 419-872-8729

Registration must be received by October 31, for the reduced rate. Today's date _____

Name: _____

Business Address _____
City _____ State _____ Zip Code _____ Phn _____ OR

Home Address _____
City _____ State _____ Zip Code _____ Phn _____

E-Mail _____

Type of Credit Card:

Visa MasterCard Discover Check Enclosed (payable to NWOOA)

Card # _____ Security Code (3 digit on back) _____ Exp _____

Name as it appears on the card _____

Credit card billing address _____
City _____ State _____ Zip Code _____

E-Mail _____

Rates Pricing includes all meals/functions, lectures and Pizza Dinner on Friday night.

On or Before 10/01/2012 After 10/01/2012

NWOOA Members	_____ \$525.00	_____ \$565.00
OOA Members	_____ 550.00	_____ 590.00
Any Nonmember	_____ 575.00	_____ 615.00
Retired Physician	_____ 275.00	_____ 315.00
Spouse Guest	_____ 15.00	_____ 15.00
Students Interns/Residents	_____ 0.00	_____ 0.00
PA/CNP	_____ 225.00	_____ 265.00

Total Amt Enclosed \$ _____

You must register for this course.

ACLS/BLS Recertification Course Will be attending _____

This course will be offered on Sunday morning 8 a.m.-12 p.m. Course materials will be mailed directly to registrants approximately two weeks prior to the conference. This course is limited to approximately 25 attendees so early registration is recommended. Certification will be filed by the NWOOA and certificates will be mailed directly to the registrants.

A total of up to 21.5 category 1A credits will be requested from the American Osteopathic Association. Note: No credit will be given to those physicians who fail to sign in or turn in their attestation forms. The NWOOA certifies credit hours in conjunction with the OOF directly to the OOA and will provide attendance certificates for your records. No credit for ACLS only. Refunds for cancellation will be granted in full minus a \$45.00 administrative fee.

Please note: The registration is only for the CME. You must make your room reservation at the Kalahari Resort at 1-877-525-2427. Make sure you mention that you are with the NWOOA to get the blocked room rate. Kalahariresorts.com