

2017 MASO Annual Session

# Onsite Registration Form

November 2 – 5, 2017 • Southampton Parish, Bermuda

Registration fees include: all lectures / continuing education credits, solution center access, 2 continental breakfasts, 2 lunches, 3 beverage breaks, Friday Welcome Reception, and discounted rate to the Saturday Evening Dinner & Social Event.

Confirmation will be sent to the email address listed: (please print)

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City/ State / Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

**Registration Type:** (please select one)

- |   |       |
|---|-------|
| <input type="checkbox"/> AAO / MASO Member Doctor                   | \$495 |
| <input type="checkbox"/> AAO Member / Non MASO Member Doctor        | \$520 |
| <input type="checkbox"/> MASO Retired Member                        | \$300 |
| <input type="checkbox"/> AAO Student Member within the MASO Region  | \$225 |
| <input type="checkbox"/> AAO Student Member outside the MASO Region | \$250 |
| <input type="checkbox"/> Other / Non AAO                            | \$850 |
| <input type="checkbox"/> Staff                                      | \$325 |
| <input type="checkbox"/> Spouse / Guest                             | \$275 |
| <input type="checkbox"/> Child (age 5 to 13 years)                  | \$125 |

The information below will be used for name badge purposes:

Full Name: \_\_\_\_\_ City / State: \_\_\_\_\_

**Events:** (please select the complimentary events you will attend)

- Friday Continental Breakfast
- Friday Lunch
- Friday Welcome Reception
- Saturday Continental Breakfast
- Saturday Lunch
- Sunday Continental Breakfast

**Additional Events:**

- |  |      |
|--|------|
| <input type="checkbox"/> Saturday Beach Party Dinner- Registered Adult   | \$50 |
| <input type="checkbox"/> Saturday Beach Party Dinner- Unregistered Adult | \$75 |
| <input type="checkbox"/> Saturday Beach Party Dinner- Registered Child   | \$25 |
| <input type="checkbox"/> Saturday Beach Party Dinner- Unregistered Child | \$35 |
| <input type="checkbox"/> Fun Run   | \$15 |

**Payment Information**

- I have enclosed check # \_\_\_\_\_ as payment in US Funds. (payable to MASO)
- Please charge my card:

Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_ CCID \_\_\_\_\_

**AMT DUE** \_\_\_\_\_

Fax or email completed form to the MASO office.

(f) 614.221.1989 (e) [jessica@assnoffices.com](mailto:jessica@assnoffices.com)

Questions? Call Jessica at 614-221-1900