

# COURSE REGISTRATION

## Emergency and Urgent Care • November 7-10, 2012

### Sheraton Wild Horse Pass Resort & Spa • Phoenix (Chandler), Arizona

Register online at [www.aafp.org/courses/emergencycare](http://www.aafp.org/courses/emergencycare)

AAFP Member ID #: \_\_\_\_\_

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

Nickname (badge purposes): \_\_\_\_\_

Degree: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail (REQUIRED): \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Phone #: \_\_\_\_\_

#### Registration Fees

On or Before 10/10/12 After 10/10/12

<input type="checkbox"/> AAFP Member <i>(Active, International, Inactive, Life, Supporting)</i>	\$805	\$995
<input type="checkbox"/> AAFP New Physician Member	\$730	\$920
<input type="checkbox"/> AAFP Student/Resident Member	\$605	\$745
<input type="checkbox"/> Allied Health Professional <i>(RN, PA-C, NP, Etc.)</i>	\$805	\$995
<input type="checkbox"/> Nonmember <i>(Physician, Student, Resident)</i>	\$1,205	\$1,495

#### GO Green! with AAFP

The AAFP is focused on providing the best course resources available, while reducing environmental impact.

Your registration fee includes access to course materials online, which are available approximately one week prior to the course start date. Additional information and instructions will be provided by email.

If you wish to purchase a printed copy of the syllabus, please check the box below. (You will still have access to course materials online.)

(901) Syllabus hard copy – \$60.

#### Special Needs

If you have physical or dietary restrictions, please mark the appropriate boxes below.

- (950) Vegetarian  
 (951) Gluten Free  
 (952) Wheelchair Accessibility  
 (953) Hearing Impaired  
 (954) Lactation Room  
 (955) Other – an AAFP staff member will contact you.

#### Method of Payment

Enclose check or indicate credit card information for the registration fee. **(Payment is expected to accompany this form.)**

- Visa    Mastercard    Discover    American Express  
 Check enclosed **(payable to AAFP)**

Total due: \$ \_\_\_\_\_

Name on Card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Exp Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**The AAFP must receive notice of cancellation no later than October 17, 2012. Requests for full cancellations will be refunded less a \$50 administrative fee. See the entire policy online at [www.aafp.org/cmecancellations](http://www.aafp.org/cmecancellations).**

**Have you made your hotel reservation?  
Hotel information available at  
[www.aafp.org/courses/emergencycare](http://www.aafp.org/courses/emergencycare) or call the  
hotel at (888) 218-8989. Don't forget the deadline  
is October 10, 2012.**



AMERICAN ACADEMY OF  
FAMILY PHYSICIANS

Return with appropriate payment or call:

American Academy of Family Physicians

Attn: Contact Center

11400 Tomahawk Creek Parkway, Leawood, KS 66211

Phone: (800) 274-2237 • Fax: (913) 906.6075

E-mail: [contactcenter@aafp.org](mailto:contactcenter@aafp.org)