

COURSE REGISTRATION

Selected Topics in Internal Medicine

March 16-20, 2010 — Fiesta Americana Condesa Cancun
Cancun, Mexico

Register online at
www.aafp.org/courses/internalmed

AAFP Member ID #: _____

Name: _____

Nickname (badge purposes): _____

Degree: _____

Address: _____

City, State, Zip: _____

Phone: _____

Fax: _____

E-mail: _____

Emergency Contact Name: _____

Emergency Contact Phone #: _____

Registrants will be offered two "Learning Tracks" for the daily Breakout sessions. One track will be Breakout sessions on various clinical topics. The second track will offer individuals the opportunity to complete a SAM's session during this course on the topic Health Behavior. The SAM's session must be attended daily to receive proper credit. Participants of the SAM's Breakout session will be awarded CME credit by the ABFM upon completion of the clinical simulation. Please indicate if you will be attending SAM's or the Breakout sessions.

- (200) I will be attending the daily SAM's session on Health Behavior.
 (201) I will be attending the Breakout sessions.

Special Needs

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

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

Registration Fees

	On or Before 2/15/10	After 2/15/10
<input type="checkbox"/> AAFP Active Member	\$575	\$715
<input type="checkbox"/> AAFP New Physician Member	\$525	\$655
<input type="checkbox"/> Nonmember	\$865	\$1,075
<input type="checkbox"/> Student/Resident Member	\$435	\$535
<input type="checkbox"/> Allied Health Professional (RN, PA-C, NP, Etc.)	\$575	\$715

Go GREEN with AAFP! Your registration fee includes a flash-drive of the course materials which will be presented onsite. You may wish to bring a laptop to view these materials. A limited number of power outlets will be available. If you would like a hard copy of the syllabus, it may be purchased for an extra fee by checking the box below.

- (900) Syllabus hard copy – extra fee of \$50

Guest Meals

A limited number of continental breakfast tickets will be available for guests at an additional fee. Only paid registrants may attend the educational sessions.

- (001) Guest Breakfast (4 days)

\$104 x # _____ of guest(s) = _____ total
Total Due: \$ _____

Method of Payment

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

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

Card Number: _____

Exp Date: _____

Signature: _____

The AAFP must receive notice of cancellation no later than February 23. Requests for full cancellations will be refunded less a \$50 administrative fee. See the entire policy online at www.aafp.org/cmecancellations.

Have you made your hotel reservation? Hotel information is available at www.aafp.org/courses/internalmed or call the hotel at (800) 343-7821, or go to www.fiestamericana.com/cancun and select Fiesta. Don't forget the deadline is February 15, 2010.



AMERICAN ACADEMY OF
FAMILY PHYSICIANS

Return with payment or call:

American Academy of Family Physicians

Attn: AAFP Contact Center

11400 Tomahawk Creek Parkway, Leawood, KS 66211

Phone: (800) 274-2237 • Fax: (913) 906-6083

E-mail: contactcenter@aafp.org