

AAFP FAMILY MEDICINE EXPERIENCE (FMX) Satellite CME Symposium Application New Orleans, LA • October 9–13, 2018

Providers planning to hold a Satellite CME Symposium must complete this application and agree to adhere to AAFP Guidelines for Satellite CME Symposiums.

Title of Event: _____

Provider:

(Organization e.g., hospital, university, etc, responsible for the overall event.)

Company Name: _____

Contact Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____

Event sponsor(s):

(List name/company as it should be acknowledged in contractual and print material.)

Secondary sponsor(s):

(List name/company as it should be acknowledged in contractual and print material.)

Please indicate below your first and second choice of an event time:

	Tuesday Oct. 9, 2018		Wednesday Oct. 10, 2018		Thursday Oct. 11, 2018	
	1st	2nd	1st	2nd	1st	2nd
Breakfast (6-7:30 a.m.)	-	-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lunch (11:30 a.m.-1 p.m.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-	-
Dinner (6:30-8 p.m.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Signature: _____

Print name: _____

FMX17112009



Julia Ozark, American Academy of Family Physicians
11400 Tomahawk Creek Parkway, Leawood, KS 66211-2672
Phone: (913) 906-6297
Email: jozark@aaafp.org

