

Eastern Vascular Society Registration Form

REGISTER ONLINE at www.easternvascular.org

October 5-8, 2017

ATTENDEE INFORMATION *(please print)*

Name	Hospital/Affiliation	
Address	City	
State/Province	Country	Postal Code
Phone	Fax	
Select One:	<input type="checkbox"/> Academic Practice <input type="checkbox"/> Private Practice	
Email Address <i>(required for confirmation)</i>		
Spouse/Guest If Attending		

REGISTRATION FEES

<u>ANNUAL MEETING</u>	<u>BEFORE</u> <u>September 13</u>	<u>BEGINNING</u> <u>September 13</u>	<u>Amount</u>
Member	\$375	\$425	_____
Non-Member Physician	\$550	\$600	_____
Allied Health Professional / Other	\$225	\$275	_____
Resident *	\$50	\$100	_____
Medical Student	\$50	\$100	_____





YOUNG SURGEONS PROGRAM (Saturday) Will Attend? Yes No *Complimentary*
For medical students, general surgery residents, vascular residents and fellows

JOB FAIR (Saturday morning) Will Attend? Yes No

* Must Provide a Signed Letter from Residency Director

SPOUSE/GUEST \$100 _____
(Includes the Welcome Reception on Thursday evening and a Cocktail Reception on Friday evening)

TOTAL ENCLOSED \$ _____

<input type="checkbox"/> 	<input type="checkbox"/> 	<input type="checkbox"/> 	
Name (As it appears on Card) _____			Security Code: _____
(See card images above) CREDIT CARD NUMBER: _____			
EXPIRATION DATE: ____ / ____			
BILLING ADDRESS _____ (If not the same as address listed above)			
SIGNATURE: _____			
I authorize EVS to charge my credit card the above fees			

CANCELLATIONS

All requests for cancellations must be in writing and received at the EVS Administrative Offices on or before **Tuesday, September 26**. The registration fee, less a \$50 processing fee, will be refunded after the meeting. No refunds are available for partial attendance. No refunds will be issued for cancellations received after **Tuesday, September 26**.

500 Cummings Center, Suite 4400 || Beverly, Massachusetts 01915 || Telephone: 978.927.8330 || Fax: 978.524.0461