

# ISMICS 2008 Meeting Registration Form

**REGISTER ONLINE** at [www.ISMICS.org](http://www.ISMICS.org)

## ATTENDEE INFORMATION *(please print)*

Name	Hospital/Affiliation	
Address	City	
State/Province	Country	Postal Code
Phone	Fax	

Email Address *(required for confirmation)*

## REGISTRATION FEES All Fees Quoted & Payable In USD

COMPLETE PROGRAM POSTGRADUATE COURSES & ANNUAL MEETING	EARLY BIRD <i>Thru 11 April 2008</i>	REGULAR <i>Beginning 12 April 2008</i>	ONSITE <i>From 1 June 2008</i>	Amount
Member*	\$795	\$995	\$1095	
Non-Member Physician	\$1095	\$1295	\$1395	
Allied Health Professional	\$495	\$595	\$595	
Resident**	\$395	\$395	\$395	
<b>ANNUAL MEETING</b>				
Member*	\$500	\$600	\$700	
Non-Member Physician	\$700	\$800	\$900	
Allied Health Professional	\$300	\$400	\$400	
Resident**	\$150	\$150	\$150	
<b>POSTGRADUATE COURSES ONLY</b>				
Post Graduate Full - Day Course – Member*	\$395	\$595	\$595	
Post Graduate Full - Day Course – Non-Member	\$595	\$795	\$795	
<i>Select One Full-Day Post Graduate Course*</i>				
<input type="checkbox"/> <b>Surgical Treatment of Atrial Fibrillation Course</b>	<input type="checkbox"/> <b>Advances in Minimally Invasive Thoracic Surgery</b>			
<b>All Postgraduate Courses are Wednesday 11 June.</b>				
Post Graduate Half – Day Course – Member*	\$195	\$395	\$395	
Post Graduate Half – Day Course – Non-Member	\$295	\$495	\$495	
<i>Select One Half-Day Post Graduate Course*</i>				
<input type="checkbox"/> <b>Endovascular Aortic Therapies Course</b>	<input type="checkbox"/> <b>Percutaneous Valvular Therapies Course</b>			
<b>SPOUSE/GUEST</b> (Wednesday/Thursday Exhibit Hall Receptions & Friday Top of the Hub Reception - Badge will be required for admittance.)	\$100	\$100	\$100	
<b>TOTAL ENCLOSED</b>			\$ _____	

\* Member fees will be honored for those ISMICS members in good standing with membership dues current.

\*\* Annual Meeting fees (not including PG Courses) will be waived for presenting residents & TSRA Members (all formats including full-length, mini, video and poster).

## PAYMENT

Credit cards are preferred. ISMICS accepts American Express, MasterCard or Visa. Registration fees may also be paid via check/money orders drawn on US banks only, payable in US dollars to ISMICS. **Registration Deadline: 1 June 2008**

Card Number:	Security Code:	Expires: /
Signature:		Print Name of Cardholder:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Billing Address: <input type="checkbox"/> Same as above		
Address:		
City:	Postal Code:	Country:

**FAX THIS FORM:** 1-978-524-0498. If paying by check or money order, please **MAIL THIS FORM:** ISMICS, Annual Scientific Meeting, 900 Cummings Center, Suite 221-U, Beverly, MA 01915 USA.

### CANCELLATIONS

All requests for cancellations must be in writing and received at the ISMICS Administrative Offices on or before 1 June 2008. 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 1 June 2008.