

REGISTRATION FORM

OKLAHOMA OSTEOPATHIC ASSOCIATION'S VIRTUAL 2020 SUMMER CME

August 21-23, 2020

17 AOA Category 1-A Credits

Live-Streamed Via Zoom

Jonathan B. Stone, DO, MPA, FAAPMR, program chair



Name _____ Specialty _____

City of Practice _____ Phone _____ Valid Email Address _____

REGISTRATION FEES

	ON OR BEFORE 08.14.20	AFTER 08.14.20
<input type="checkbox"/> DO Member Registration (including Proper Prescribing)	\$ 350	\$ 380
<input type="checkbox"/> DO Member Proper Prescribing & Risk Management Only Registration	\$ 210	\$ 240
<input type="checkbox"/> Retired DO Member Registration (including Proper Prescribing)	\$ 110	\$ 140
<input type="checkbox"/> DO NonMember Registration (including Proper Prescribing)	\$ 850	\$ 880
<input type="checkbox"/> DO NonMember Proper Prescribing & Risk Mgmt. Only Registration	\$ 710	\$ 740
<input type="checkbox"/> MD/Non-Physician Registration (including Proper Prescribing)	\$ 450	\$ 480
<input type="checkbox"/> MD/Non-Physician Proper Prescribing & Risk Mgmt. Only Registration	\$ 310	\$ 340
<input type="checkbox"/> Student Intern Resident Fellow Registration	\$ 0	\$ 0

\$	REGISTRATION TOTAL
\$	MEMBERSHIP FEE TOTAL*
\$	TOTAL ENCLOSED/DUE

*if applicable

ACCREDITATION

The OOA is accredited by the American Osteopathic Association to provide osteopathic continuing medical education for physicians. The OOA designates this program for a maximum of 17 AOA Category 1-A credits. AAFP credits are pending.

NOTE: Membership dues must be current at the time of registration and at the time of the conference to qualify for member rates. Requests for refunds must be received before August 14, 2020, and a \$30 service fee will be charged. No refunds after August 14, 2020. A printed syllabus will not be available.

MEMBERSHIP FEES

<input type="checkbox"/> 4 or more years in practice	\$ 600
<input type="checkbox"/> 3rd Year of Practice	\$ 500
<input type="checkbox"/> 2nd Year of Practice	\$ 300
<input type="checkbox"/> 1st Year of Practice	\$ 200
<input type="checkbox"/> Military	\$ 100
<input type="checkbox"/> Out-of-state	\$ 100
<input type="checkbox"/> Associate Member*	\$ 100

TO COMPLETE YOUR REGISTRATION

- Mail this form to 4848 N. Lincoln Blvd., OKC, OK 73105
- Fax this form to 405.528.6102
- Register online at www.okosteo.org/upcoming-cmes-events

PAYMENT INFORMATION:

- Check enclosed (check must be made payable to OOA representing payment for items checked.)
 - Credit Card Information Below (all information must be provided below for your card to be processed.)
- VISA MASTERCARD DISCOVER AMERICAN EXPRESS

Name on Card _____

Credit Card No. _____

Exp. Date _____ 3 Digit CID No. _____

Billing Address _____

City _____ ST & ZIP _____

Signature _____

*ASSOCIATE MEMBERSHIP

Associate membership may be granted to teaching, research, administrative, or executive employees of accredited osteopathic colleges or of osteopathic hospitals approved by the American Osteopathic Association, members' full-time employees, and to administrative employees of this Association or of affiliated organizations or of district societies.