

# Registration Form



## STEP ONE: Badge Information

\*\*Full Name as it should appear on name badge: \_\_\_\_\_

\*\*Organization: \_\_\_\_\_

Address: \_\_\_\_\_

\*\*City: \_\_\_\_\_

\*\*State/Province: \_\_\_\_\_ Zip: \_\_\_\_\_ \*\*Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

\*\* This information will be used for your name badge and attendee roster.

## STEP TWO: Pre-Conference Workshops

Do you have any dietary/accessibility needs?

- Vegetarian    Gluten Allergy    Gluten-Free Diet Preference  
 Vegan    Diabetic    Kosher    Other \_\_\_\_\_

REQUIRED: In case of emergency at the meeting, please contact (Name/Telephone/Relationship): \_\_\_\_\_

- First-time attendee of the NAEMSP® Annual Meeting.

## STEP THREE: Pre-Conference Workshops

NAEMSP® National EMS Medical Directors Course and Practicum® (Mon.-Wed. Jan. 7-9) **Advance Registration Only – Postmarked/online by Dec. 14.**

- |   |         |
|---|---------|
| <input type="checkbox"/> NAEMSP® Member       | \$975   |
| <input type="checkbox"/> NAEMSP® Non-Member** | \$1,250 |

Please note that if you register as a non-member for the above pre-conference, you should register for the annual meeting at the member rate.

- |   |       |
|---|-------|
| <input type="checkbox"/> EMS Quality & Performance Improvement (Mon. Jan. 7 & Tue. Jan. 8)      |       |
| <input type="checkbox"/> Both days  | \$450 |
| <input type="checkbox"/> Day 1  | \$300 |
| <input type="checkbox"/> Day 2  | \$300 |
| <input type="checkbox"/> Operational Canine (Tue. Jan. 8)                                       | \$250 |
| <input type="checkbox"/> Advanced Topics in MIH/CP (Tue. Jan. 8 AM)                             | \$150 |
| <input type="checkbox"/> EMS Faculty Development (Tue. Jan. 8 PM)                               | \$150 |
| <input type="checkbox"/> NAEMSP® Advanced Topics in Medical Direction™ (Wed. Jan. 9)            | \$350 |
| <input type="checkbox"/> EMS Physician Procedure Cadaver Lab & Airway Workshop (Wed. Jan. 9 AM) | \$150 |
| <input type="checkbox"/> Optimal Pediatric Care (Wed. Jan. 9 AM)                                | \$150 |
| <input type="checkbox"/> Out of Hospital Cadaver Lab (Wed. Jan. 9 PM)                           | \$150 |
| <input type="checkbox"/> Distinctly Canadian Workshop (Thur. Jan. 10 PM)                        | \$50  |

## STEP FOUR: Meeting Registration Fees

The registration fee includes educational sessions, activities and social events for paid attendees. These include continental breakfasts, refreshment breaks, program materials, the welcome reception, the two group luncheons and the awards luncheon. Please check the category that applies to your registration below:

### NAEMSP® MEMBER

*Advance registration discount expires on Dec. 14. All registrations received after Dec. 14 will be subject to a late fee.*

|   | By December 14                 | December 15 & After            |
|---|--------------------------------|--------------------------------|
| <input type="checkbox"/> Physician                | <input type="checkbox"/> \$725 | <input type="checkbox"/> \$870 |
| <input type="checkbox"/> Professional             | <input type="checkbox"/> \$550 | <input type="checkbox"/> \$660 |
| <input type="checkbox"/> Resident                 | <input type="checkbox"/> \$550 | <input type="checkbox"/> \$660 |
| <input type="checkbox"/> Fellow                   | <input type="checkbox"/> \$625 | <input type="checkbox"/> \$750 |
| <input type="checkbox"/> Student                  | <input type="checkbox"/> \$375 | <input type="checkbox"/> \$450 |
| <input type="checkbox"/> International Physician* | <input type="checkbox"/> \$700 | <input type="checkbox"/> \$840 |

### NON-MEMBER

|  |                                  |                                  |
|--|----------------------------------|----------------------------------|
| <input type="checkbox"/> Physician Non-Member                | <input type="checkbox"/> \$1,050 | <input type="checkbox"/> \$1,195 |
| <input type="checkbox"/> Professional Non-Member             | <input type="checkbox"/> \$735   | <input type="checkbox"/> \$845   |
| <input type="checkbox"/> Resident Non-Member                 | <input type="checkbox"/> \$700   | <input type="checkbox"/> \$810   |
| <input type="checkbox"/> Fellow Non-Member                   | <input type="checkbox"/> \$810   | <input type="checkbox"/> \$935   |
| <input type="checkbox"/> Student Non-Member                  | <input type="checkbox"/> \$490   | <input type="checkbox"/> \$565   |
| <input type="checkbox"/> International Physician* Non-Member | <input type="checkbox"/> \$885   | <input type="checkbox"/> \$1,025 |

\*International registration category applies to non-U.S. physicians only.

\*\*Non-member rate includes membership in NAEMSP® for one year, with a discount for new physician members. This discount applies to new members only. Please notify us if you do not wish to join NAEMSP®. The above non-member rate still applies.

Submission and acceptance of an NAEMSP® membership application authorizes the NAEMSP® Executive Office the right and privilege to email you as a member. Please contact the NAEMSP® Executive Office if you would like to opt out.

**STEP FIVE: Single-Day Attendance**

Please mark which day(s) you will attend. This allows your attendance at that day's events only. Complete this section only if you haven't selected full conference registration on the front page.

| Registration Type                       | Per day | Thursday                 | Friday                   | Saturday                 |
|---|---------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> Physician      | \$348   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Professional   | \$264   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Resident       | \$264   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Fellow         | \$300   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Student        | \$180   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> International* | \$336   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**STEP SIX: Membership Renewal**

Renew your membership now at the rates below (membership will expire 12/31/2019). Visit the NAEMSP website for auto-renewal options.

If as of 2018 you have been an NAEMSP® member for 25 or 30 years, please attach the coupon sent to you to receive the discount\*\*\*.

|   |       |
|---|-------|
| <input type="checkbox"/> Physician Membership Renewal     | \$375 |
| <input type="checkbox"/> International Membership Renewal | \$185 |
| <input type="checkbox"/> Professional Membership Renewal  | \$185 |
| <input type="checkbox"/> Fellow Membership Renewal        | \$185 |
| <input type="checkbox"/> Resident Membership Renewal      | \$150 |
| <input type="checkbox"/> Student Membership Renewal       | \$115 |

**STEP SEVEN: Guest Fee(s)**

Guest Fee(s) \$175 \$\_\_\_\_\_

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Guest fee(s) includes the Welcome Reception and continental breakfasts.

Guest Name(s) \_\_\_\_\_

Guest Name(s) \_\_\_\_\_

**STEP EIGHT: Fun Run**

NAEMSP® Fun Run!

\$25 – Includes a Fun Run T-shirt and a charitable donation to a worthy cause

\$\_\_\_\_\_

T-shirt size (S-XXL) \_\_\_\_\_

**STEP NINE: Total Fees**

Total Workshop Activities (step 3) \$ \_\_\_\_\_

Total Meeting Registration Fees (step 4) \$ \_\_\_\_\_

OR

Total Single-Day Attendance (step 5) \$ \_\_\_\_\_

Total Membership Renewal (step 6) \$ \_\_\_\_\_

Total Guest Fee(s) (step 7) \$ \_\_\_\_\_

Total Fun Run Fees (step 8) \$ \_\_\_\_\_

**TOTAL PAYMENT ENCLOSED** \$ \_\_\_\_\_

(payment is due with the registration form)

\*\*\*This discount will not be applied on this form. Please subtract the discount from the total payment due.


**STEP TEN: Method of Payment**


All funds *MUST* be drawn on a U.S. bank in U.S. funds. NAEMSP® does not accept Purchase Orders or invoice for services. **Tax ID 57-0820621**

Check made payable to NAEMSP® – check # \_\_\_\_\_

All credit card payments must be submitted online at [www.NAEMSP.org](http://www.NAEMSP.org)

**STEP ELEVEN: Submit Your Registration**

**1.  Online:** Visit our website at [www.NAEMSP.org](http://www.NAEMSP.org) and click on the Annual Meeting link.

**2.  By Mail:** Mail completed registration form and appropriate fees to:  
NAEMSP® Executive Office  
P O Box 723248  
Atlanta, GA 31139

**ADVANCE REGISTRATION DEADLINE – postmark/online: Dec. 14**

All registrations received after Dec. 14 are charged at a higher rate.

- Registrations and payments will not be taken over the phone.
- All payments must be received prior to the beginning of the Annual Meeting.
- NAEMSP® does not accept purchase orders and does not bill/invoice for services.

**Cancellation Policy:**

Written notice of cancellation received on or before Dec. 14 will be refunded less a \$100 processing fee (to be processed after the meeting). No refunds will be issued for cancellations received after Dec. 14. Substitution of registrants is allowed.

**Questions?** Call 800.228.3677 or 913.222.8654, or email [info-NAEMSP@NAEMSP.org](mailto:info-NAEMSP@NAEMSP.org).