

# NEW ENGLAND SECTION OF THE AMERICAN UROLOGICAL ASSOCIATION 78<sup>TH</sup> ANNUAL MEETING REGISTRATION FORM

Please Print Clearly Or Type

Name: \_\_\_\_\_

Institution: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Spouse/Guest Name: \_\_\_\_\_ Spouse/Guest Email: \_\_\_\_\_

*Only if Attending* *City & tour information will be sent directly to the above email*

## REGISTRATION FEES

	Before 8/28/09	After 8/28/09	Beginning 9/14/09	<u>Total</u>
_____ NE-AUA Member	\$375	\$425	\$475	\$ _____
_____ AUA Member	\$375	\$425	\$475	\$ _____
_____ Guest Physician	\$450	\$500	\$550	\$ _____
_____ Resident/Fellow*	\$185	\$225	\$225	\$ _____
_____ Resident/Fellow* Presenting				Complimentary
_____ Candidate Members				Complimentary
_____ Allied Health	\$185	\$225	\$225	\$ _____
_____ Spouse/Guest	\$225	\$250	\$300	\$ _____

\* Must Provide Letter from Chief of Service

Please contact me regarding special needs.

**TOTAL AMOUNT DUE:**

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

## METHOD OF PAYMENT

Please charge my registration fees to the following credit card:

Name As It Appears on Credit Card: \_\_\_\_\_

Billing Address of Card Holder:  Same as Above or \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ / \_\_\_\_\_

Security Code: \_\_\_\_\_ (See card images below) Where is your Card Security Code? Your credit card's security code is a 3- or 4- digit number located on its front or back of your credit card



Signature: \_\_\_\_\_

I would like to pay by check (enclosed).

Please make checks (in U.S. funds) payable to:

NE-AUA ♦ 900 Cummings Center ♦ Suite 221-U ♦ Beverly, Massachusetts 01915

Phone: 978-927-8330 ♦ Fax: 978-524-0498 ♦ www.neaua.org

*All requests for cancellations must be received in writing. If a written request of cancellation is received at the Society's Administrative Office prior to Friday, September 4, 2009, the registration fee, less a \$50.00 administrative fee, will be refunded after the meeting.*

*Refund requests received after September 4<sup>th</sup> will not be honored.*