REGISTRATION FORM

Hilton Garden Inn & Edmond Conference Center 2833 Conference Drive, Edmond, OK, 73034 For hotel reservations, call 405-285-0900

Name Degre			gree	2021 Summer 13-15, 2021						
Preferred First Name for Bad	ge							01	Summe	13-13
Guest(s)								2011	Mign	
City of Practice	Phone			Email /	Address	3				
REGISTRATION FEES		ON OR BEF	FORE 30.21	AF 07.3	TER 0.21					
DO & MD Member Registration* DO & MD Member Proper Prescribing & Risk Mana		NOITA S	469 319	\$ \$	499 349	NOIL	□ \$ □ \$		\$	Registration Total
Retired DO & MD Member Registra DO & MD Non-Member Registra DO & MD Non-Member	ation*	REGISTRATION	209 969 819	\$ \$ \$	239999849	REGISTRATION	□ \$ □ \$ □ \$	1049	\$	Membership Fee Total*
Proper Prescribing & Risk Mana Allied Health Provider Registrati Allied Health Provider			569 419	\$ \$	599 449		□ \$ □ \$		\$	Total Enclosed/Due
Proper Prescribing & Risk Mana Student Intern Resident Fello		IN-PERSON	free		free	VIRTUAL		free	Special Need	*if applicable s or Dietary Requests*
* Includes: Proper Prescribing, Risk Managemer + Four hours of AOA Category 1-A credit on SAT	TURDAY, including Proper Prescribing cour	se, Risk Manageme				_				e submitted by July 30, 2021
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NOTE: Membership dues must be c	urrent at the time of registration	and at the time	of the c	onference t	o qualify	for mem	ber rat	tes. Red	quests for r	efunds must be

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 July 30, 2021. A printed syllabus will not be available.

MEMBERSHIP						
☐ Regular Membership	\$ 500					
☐ 3 or more years in practice	\$ 400					
2nd Year of Practice	\$ 300					
1st Year of Practice	\$ 200					
☐ Military	\$ 100					
☐ Out-of-state	\$ 100					

Updated schedule and session information will be available online (www.okosteo.org/upcoming-events) and on the OOA Summer app as it is confirmed.

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.)

	I VISA	□ MASTERCARD	□ DISCOVER	□AMERICAN EXPRESS					
	Name	on Card							
	Credit	Card No.							
Exp. Date			3 Digit C	3 Digit CID No.					
	Billing	Address							
City			ST	ST & ZIP					
	Signat	ure							

For hotel room reservations, please call 405-285-0900.

Don't forget to mention the group code: OOA 2021 Summer CME Seminar Special room rate of \$109 per night valid through July 30, 2021.

Important Proper Prescribing News

To obtain proper prescribing credit through OSBOE a physician should attend a proper prescribing course once every year that has been approved through the licensure board (speaker and material).