# **REGISTRATION FORM**

## AN OUNCE OF PREVENTION JANUARY 21-23, 2022 TERESA HARDESTY, DO, CHAIR **UP TO 17 AOA CATEGORY 1-A & AAFP CREDITS!**

2022 Winter CME Seminar

Name

Degree

#### Preferred First Name for Badge

Guest(s)											
City of Practice	Phone				Email	Address					
<b>REGISTRATION FEES</b>		ON OI		ORE 07.22		-TER 07.22					
DO & MD Member Registration*		z	□\$	469	\$	499	_	□\$	549		
DO & MD Member		2	□ \$	319	\$	349	ION	□\$	399	\$	Registration Total
Proper Prescribing & Risk Managem	nent Only Registration*	TRATIO					Ę			Ψ	rogioliation rotar
Retired DO & MD Member Registration*		TR	□\$	209	\$	239	2	□\$	289		
DO & MD Non-Member Registration*		Sis	□\$	969	\$	999	ISTR/	□\$	1049	\$	Membership Fee
DO & MD Non-Member		REGIS	□\$	819	\$	849	G	□\$	899	Ť	Total*
Proper Prescribing & Risk Managem	ent Only Registration⁺						REG				Tatal
Allied Health Provider Registration*		NO	□\$	569	\$	599	Ļ	□\$	649	\$	Total
Allied Health Provider		SS	□\$	419	\$	449	UAL	□\$	499		Enclosed/Due
Proper Prescribing & Risk Management Only Registration*		IN-PERS					RT				*if applicable
Student   Intern   Resident   Fellow Registration*		4		free		free	VIR		free	Special Need	ls or Dietary Requests*
		2									
* Includes: Proper Prescribing, Risk Management, two continental breakfasts & Saturday luncheon											
+ Four hours of AOA Category 1-A credit on SATURD	AY, including Proper Prescribing cou	rse, Risk Ma	nagemei	nt course						*must be	e submitted by January 7, 2022

□ I will be attending the Mentor/Mentee Reception Saturday, January 22, 2022

□ \_\_\_\_ # of Guests

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 January 7, 2022 and a \$30 service fee will be charged. No refunds after January 7, 2022. 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
□ <sub>Military</sub>	\$ 100
□ Out-of-state	\$ 100

Updated schedule and session information will be available online (www.okosteo.org/upcoming-events) and on the OOA Winter 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.)
- UVISA MASTERCARD DISCOVER AMERICAN EXPRESS

Name on Card		
Credit Card No.		
Exp. Date	3 Digit CID No.	
Billing Address		
City	ST & ZIP	
Signature		



HARD ROCK HOTEL & CASINO 777 W CHEROKEE ST., CATOOSA, OK, 74105 FOR HOTEL RESERVATIONS, CALL 1.800.760.6700

# **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 Oklahoma State Board of Osteopathic Examiners (speaker and material).