


Course Registration Application

Advanced Injection Techniques: Maximize Safety and Minimize Complications | Nov. 23-24, 2019 • New York, NY

Please complete a separate form for each attendee and return it with your full payment via credit card on form or by check to the address indicated. Participation will be confirmed on a first-come, first-served basis, upon verification of prerequisites and space availability.

How did you hear about this course?

Attendee Name		ASDS Member ID#	
Practice / Institution Name			
Practice / Institution Address			
City	Province/State	Postal Code	Country
Phone (include country code outside U.S.)		Fax (include country code)	
Email (for ASDS communication only)			

 **ADA / SPECIAL ASSISTANCE.** Check if you require assistance to fully participate in the meeting. An ASDS staff member will contact you prior to the course date.

Prerequisites for participation

- **Member and non-member dermatologists:** Must be actively practicing/employed full-time by a medical entity that is focused on dermatologic surgery.
- **Non-member dermatologists:** Certification in dermatology by the American Board of Dermatology, the Royal College of Physicians and Surgeons of Canada, the American Osteopathic Board of Dermatology or international equivalent, including the year certified.
- **Fellows-in-Training:** Provide a letter confirming enrollment in and type of Fellowship if not already on file with ASDS.

Advanced Injection Techniques Reg Fee Nov. 23-24, 2019 • New York, NY	On or Before Sept. 23, 2019	After Sept. 23, 2019 or On-site
ASDS Member Dermatologist	\$779	\$879
Non-Member Dermatologist	\$1079	\$1179
ASDS Fellow-in-Training	\$479	\$579
Please enter total (U.S. dollars):		

Do not make airline reservations prior to receiving a letter of confirmation. Visit asds.net for hotel and course details.

Registration Methods

Fax: 847-956-0999
Email: jwisniewski@asds.net
Phone: 847-956-9120
(8:30 a.m. – 5:00 p.m. CT)

Payment Information (U.S. dollars only)

Full payment is due upon application submission. Refunds, less a \$100 administrative fee, will be allowed for cancellations received at ASDS in writing thirty days before the scheduled course. After that date, no refunds will be permitted.

CREDIT CARDS FAX completed form to: 1-847-956-0999
Visa MasterCard American Express Discover

Credit Card # Exp. Date CVC

Name on Card (print) Billing ZIP

Authorized Signature

CHECKS (*Allow 7 additional business days for processing.*)

Send checks payable in U.S. dollars to:
American Society for
Dermatologic Surgery
5550 Meadowbrook Drive
Suite 120
Rolling Meadows, IL USA
60008-3805