Pediatrics on the Parkway Registration Form

Fall CME Meeting September 14 -16, 2018 Cobb Galleria Centre, Atlanta, Ga.

Please complete the form below to register. Online registration is also available (Preferred) at www.gaaap.org.

NAME: _____
Or attach a business card/

PRACTICE NAME: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIPCODE:** _____

PHONE: _____ **FAX:** _____ ***EMAIL:** _____
**(Confirmations and links to meeting handouts will be sent via email.)*

Friday, Saturday, & Sunday Fall CME Meeting Only

PRE-Registration is required for ALL activities; Check all that apply below.

☐ Friday, Morning, Coding & Practice Management Seminar
☐ Friday, Morning, MOC Part II Seminar: Building Mental Wellness (20 MOC Points)
☐ Friday, Awards Luncheon ___ *(Number attending, $40 guest fee applies)*
☐ Friday, Afternoon, Pediatric Hospital Medicine Seminar
☐ Friday, Afternoon, Pediatric Nutrition Seminar
☐ Friday, Afternoon, Advocacy Seminar
☐ Saturday, General Session
☐ Sunday, General Session

Registration Fee Fall CME Meeting *Only*:

☐ Member, Georgia AAP	$395	☐ Non-Member Physician	$515	☐ Emeritus, Georgia AAP	$155
☐ Resident	$60	☐ Medical Student	$50		
☐ Industry Rep./Professional	$545	☐ Clinical Health Professional	$275		

☐ **Late Registration after September 7th or onsite Registration *(add $40 each)***

Thursday, Afternoon - Hospital Medicine ONLY

☐

Pediatric Hospital Medicine Seminar ONLY $75

Saturday, Evening – Pediatric Foundation of Georgia Gala *(Requires Separate Fee)*

Foundation Gala Ticket ONLY $125 per person

GRAND TOTAL of ALL FEES: $ _____

Method of Payment:

☐ Please make check payable to: *Georgia Chapter/AAP* Credit Card Information ☐ Visa ☐ MC ☐ Amex

Credit Card #_____

Exp._____ Payment Amount:_____ CVV Code (3 digit code):_____

Name on the Card: _____

Complete form and return to: 1330 West Peachtree Street, Suite 500, Atlanta, GA 30309-2904 or fax to 404-249-9503 with payment by **September 7, 2018 after please add $40.** *For additional information call 404-881-5091.*