



**INTERNATIONAL
REGISTRATION FORM
MAY 16-19, 2017**

**Hyatt Regency Orlando
9801 International Dr.
Orlando, FL 32819**

Please enter your name and institution EXACTLY as you want it to appear on your badge

Name: *(Jonathan A. Smith, MD)* _____

Institution: _____

Address: _____

City: _____ **Country/Province:** _____ **Postal Code:** _____

Phone: _____ **Email:** _____

Twitter Name: _____ Do not share my email with annual meeting exhibitors

General Registration Option		
I am <input type="checkbox"/> an SAEM member <input type="checkbox"/> a non-member	Early Bird ends 3/20/17 Regular ends 5/1/17 Late after 5/1/17	Date: _____
I am a <input type="checkbox"/> Physician <input type="checkbox"/> Resident/Fellow <input type="checkbox"/> Administrator <input type="checkbox"/> Medical Student <input type="checkbox"/> Non-Physician (EMT/Paramedic/Nurse/ Physician Asst/NP/etc.)	Full Registration <input type="checkbox"/> One-Day Registration <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	Discount Code - Required Details can be found at www.saem.org/am-international-pricing

Additional Sessions																							
Full Day Pre-Meeting Workshop Tuesday, May 16 from 8 am - 5 pm <table border="1"> <tr><td>Grant Writing Workshop</td><td><input type="checkbox"/></td></tr> <tr><td>Educational Boot Camp</td><td><input type="checkbox"/></td></tr> <tr><td>EM Talk: Difficult ED Conversations</td><td><input type="checkbox"/></td></tr> <tr><td>Wilderness Medicine: Fundamentals</td><td><input type="checkbox"/></td></tr> </table>	Grant Writing Workshop	<input type="checkbox"/>	Educational Boot Camp	<input type="checkbox"/>	EM Talk: Difficult ED Conversations	<input type="checkbox"/>	Wilderness Medicine: Fundamentals	<input type="checkbox"/>	Half Day Pre-Meeting Workshop Tuesday, May 16 <table border="1"> <tr><td>10 Commandments of Pain Management in ED (8 - Noon)</td><td><input type="checkbox"/></td></tr> <tr><td>Diversity 401 (8 - Noon)</td><td><input type="checkbox"/></td></tr> <tr><td>Strategies Implementing Geriatric ED Guidelines (8 - Noon)</td><td><input type="checkbox"/></td></tr> <tr><td>Geriatric Trauma (1 - 5 pm)</td><td><input type="checkbox"/></td></tr> <tr><td>Conceptualized Emergency Ultrasound (1 - 5 pm)</td><td><input type="checkbox"/></td></tr> <tr><td>More than Accuse, Blame, Criticize (1 - 5 pm)</td><td><input type="checkbox"/></td></tr> <tr><td>Negotiate Your Way to Success (1 - 5 pm)</td><td><input type="checkbox"/></td></tr> </table>	10 Commandments of Pain Management in ED (8 - Noon)	<input type="checkbox"/>	Diversity 401 (8 - Noon)	<input type="checkbox"/>	Strategies Implementing Geriatric ED Guidelines (8 - Noon)	<input type="checkbox"/>	Geriatric Trauma (1 - 5 pm)	<input type="checkbox"/>	Conceptualized Emergency Ultrasound (1 - 5 pm)	<input type="checkbox"/>	More than Accuse, Blame, Criticize (1 - 5 pm)	<input type="checkbox"/>	Negotiate Your Way to Success (1 - 5 pm)	<input type="checkbox"/>
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Please contact the SAEM office, +1.847.813.9823, to determine your total registration fees.

Method of Payment	
<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> AmEx <input type="checkbox"/> Discover	Credit Card Payments Only
Name on Card: _____	Total Amount Due: \$ _____
Card Number: _____	Expiration: _____ CVV#: _____
Signature: _____	
Please submit your completed registration form to registration@saem.org or +1.847.813.5450 SAEM 1111 East Touhy Ave., Suite 540 Des Plaines, IL 60018	

**Cancellation Policy: A \$50 fee will be charged for cancellations made prior to March 20, 2017
 A \$100 fee will be charged for cancellations made after March 20, 2017
 No refunds will be issued for cancellations made on or after May 1, 2017**