

How to Become a Cardiovascular Investigator – April 21-22, Bethesda, MD

Application

Up to two people per training program may attend.

Name _____ Training Program & Training Director _____

Address _____

City _____ State _____ Zip _____

Daytime telephone _____ Fax _____

E-mail address (**IMPORTANT:** program information will be sent electronically) _____

Year of Fellowship (circle one) 1 2 3 3+ Jr. Faculty

Sign-up sheets for the workshops will be available on site.

Cancellation Policy: There is no fee for this program, however you are asked to give a credit card number which will be used to charge your housing and will be debited \$50.00 **only if** the cancellation policy stated below is not adhered to. Because of advance planning requirements and the limited seating for this program, please notify us as soon as possible if a cancellation must be made. There will be a \$50.00 charge for cancellations not received by April 14, 2006.

Circle one: AMEX VISA Master Card

Card Number _____ Expiration Date _____ Signature _____

Housing Information

Housing arrangements will be made directly with the hotel through ACC. The room rate is \$119.00 + 12% tax therefore; your credit card will be charged \$133.28 per night. All rooms are guaranteed for late arrival and are standard king/non smoking. **Please note:** You will be asked for a credit card number upon arrival to cover your incidentals.

Arrival Date _____

Departure Date _____

If you have needs which require special accommodations, please check here and advise us of your needs at least one week in advance of the program. An ACC staff member will contact you to discuss how we can accommodate you.

Please fax to the attention of Marilyn Stewart at 301-897-2623.

For questions, please call 800-253-4636, ext. 639.