REGISTRATION FORM

ACC/SCAI Premier Interventional Cardiology Overview and Board Preparatory Course August 10 - 12, 2018
ACC Optional Study Session August 9, 2018; 4 p.m.–8:30 p.m.; The Ritz Carlton, Amelia Island, FL

Please use **ONE of these methods** to register; (do not mail if previously faxed, telephoned or registered online)
1. Mail completed form and payment to: ACC; Attn: Resource Center; P.O. Box 37561, Baltimore, MD 21279-3561
2. Fax the registration form to: 202-375-7000
3. Call 800-253-4636, ext 5603, or (Outside the U.S and Canada, 202-375-6000, ext 5603)
4. Visit *ACC.org/intvboard2018* to register online NOTE: FIT REDUCED RATE CANNOT BE DONE ONLINE

_____
Membership Number (If applicable)

_____
Last Name *(Please print clearly)* **First Name** **Middle Initial**

☐ MD ☐ DO ☐ PhD ☐ RN ☐ NP ☐ PA ☐ CNS ☐ PharmD ☐ Other _____

_____
Street Address

_____
City State Zip

_____
Office Phone Office Fax Email *(Please print clearly)*

_____
Practice Administrator's Name Phone

What is your primary medical specialty: (Check one)

☐ Adult Cardiology ☐ CV Surgery ☐ Family/General ☐ Internal Medicine ☐ IV Cardiology ☐ Ped. Cardiology ☐ Radiology ☐ Other _____

Please register me as:	**Designation**	**Early Until 5/17**	**Regular 5/18 Until 7/18**	**Late 7/19 through Onsite**
		REGISTRATION INCLUDES THURSDAY NIGHT STUDY SESSION AT NO EXTRA COST		
☐ ACC/SCAI Member (Includes International Associate)	MD, DO, PhD	☐ $1,416	☐ $1,545	☐ $1725
☐ Non member (Includes Industry Professional)	MD, DO, PhD	☐ $1,931	☐ $2,060	☐ $2189
☐ ACC/SCAI Member Reduced (Includes CVT Members)	PA, RN, NP, CNS, PharmD, FIT, Emeritus, Resident, Student	☐ $994	☐ $1,123	☐ $1,251
☐ Non-Member Reduced	PA, RN, NP, CNS, PharmD	☐ $1,123	☐ $1,226	☐ $1,329
☐ FIT Reduced Rate (Discount has been applied to pricing in this row.) ***(Must call Resource Center at 800-253-4636 ext. 5603 to receive discount.)***	2 or more FITs Registering at same time receive 25% off of each registration rate. **Pricing in this row reflects the discount.**	☐ $745 REDUCED Rate for 2 or more registering together	☐ $842 REDUCED Rate for 2 or more registering together	☐ $938 REDUCED Rate for 2 or more registering together

Proof of licensure required for PA, Tech, RN, CNS and NP (non-CCA members); letter from training director needed for FIT

Payment must accompany application.

☐ Check payable to: American College of Cardiology Foundation, in US dollars drawn on a US bank

☐ MasterCard ☐ VISA ☐ American Express ☐ Discover

_____ _____
Cardholder's Name (Please print clearly) Signature

_____
Card Number Expiration Date Security Code

☐ **Special Needs** (Please advise us of your needs)_____

Special Dietary Requirements: (Advance notification required) ☐ Vegetarian ☐ Other _____ (Please Specify)
ACC staff will contact you to verify if this Special Meal Request can be accommodated.

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