



### REGISTRATION FORM

**Cardiovascular Summit - February 14-16, 2019; Hilton Bonnet Creek, Orlando, 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: American College of Cardiology; Attn: Resource Center P.O. Box 37561, Baltimore, MD 21297-3561
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/CVSummit19](http://ACC.org/CVSummit19) to register online

Membership Number (If applicable)

Last Name (Please print clearly) First Name Middle Initial

MD  DO  PhD  RN  NP  PA  CNS  Other \_\_\_\_\_

Street Address

City State Zip

Office Phone Office Fax Email (Please print clearly)

Practice Administrator's Name Phone

What is your primary medical area of interest: (Check one)

Adult Cardiology  CV Surgery  Family/General  Internal Medicine  IV Cardiology  Ped. Cardiology  Radiology  Other \_\_\_\_\_

### NEW THIS YEAR: Thursday's Pre-Conferences and Lunch included in registration fees!

#### REGISTRATION TUITION

Please register me as:	Designation	Early Until 11/16/18	Regular 11/17/18 Until 1/18/19	Late 1/19/19 and Onsite
ACC/AAPL/ASE/ASNC/HRS/Optum/MedAxiom/Navigant/SCAI Member Physician (includes International Associate)	MD, DO, PhD	<input type="checkbox"/> \$1125	<input type="checkbox"/> \$1325	<input type="checkbox"/> \$1425
Non-member Physician (includes Industry Professional)	MD, DO, PhD	<input type="checkbox"/> \$1500	<input type="checkbox"/> \$1700	<input type="checkbox"/> \$1800
ACC/AAPL/ASE/ASNC/HRS/Optum/MedAxiom/Navigant/SCAI Member Executive	CEO, COO, CFO, Director	<input type="checkbox"/> \$1025	<input type="checkbox"/> \$1225	<input type="checkbox"/> \$1325
Non-member Executive	CEO, COO, CFO, Director	<input type="checkbox"/> \$1350	<input type="checkbox"/> \$1550	<input type="checkbox"/> \$1650
ACC/AAPL/ASE/ASNC/HRS/Optum/MedAxiom/Navigant/SCAI Member CV Administrator	PA, RN, NP, CNS, PharmD, FIT, Student, Emeritus, Resident	<input type="checkbox"/> \$700	<input type="checkbox"/> \$900	<input type="checkbox"/> \$1000
Non-member CV Administrator	PA, RN, NP, CNS, PharmD	<input type="checkbox"/> \$1000	<input type="checkbox"/> \$1200	<input type="checkbox"/> \$1300
ACC/AAPL/ASE/ASNC/HRS/Optum/MedAxiom/Navigant/SCAI (includes CVT Member, FIT, Resident, Student and Emeritus)	PA, RN, NP, CNS, PharmD, FIT, Emeritus, Resident, Student	<input type="checkbox"/> \$700	<input type="checkbox"/> \$900	<input type="checkbox"/> \$1000
Non-member Reduced	PA, RN, NP, CNS, PharmD	<input type="checkbox"/> \$900	<input type="checkbox"/> \$1100	<input type="checkbox"/> \$1200

Proof of licensure required for PA, Tech, RN, CNS and NP (non-CVT members); letter from training director needed for FIT. International registrants are urged to FAX application to the ACC.

Payment must accompany application.  Check payable to: American College of Cardiology, 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