



# SSAT/AASST/SAGES Winter Course

## GI Surgical Emergencies: Challenges and Opportunities

January 19-20, 2018 • The Cosmopolitan of Las Vegas, Las Vegas, Nevada



### MEETING REGISTRATION FORM

**EARLY BIRD REGISTRATION DEADLINE: December 18, 2017**

PLEASE PRINT OR TYPE:

NAME: \_\_\_\_\_ NPI #: \_\_\_\_\_

*National Provider Identifier Number*

INSTITUTION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ COUNTRY: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

E-MAIL (required to receive confirmation): \_\_\_\_\_

REGISTRATION FEES	EARLY BIRD RATE (Through December 18)	STANDARD RATE (After December 18)	QUANTITY
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*All fees below are quoted and payable in US Dollars.*

A. Society Member & Active Military	\$295	\$345	_____
B. Non-Member Physician & Non-Member Allied Health	\$345	\$395	_____
C. Trainee (Society Member or Non-Member)	\$95	\$125	_____

#### ADDITIONAL TICKETS

Welcome Reception, Friday, January 19<sup>th</sup>, 5:30 - 7:00 PM      Adult \$45      Quantity: \_\_\_\_\_

#### PAYMENT METHOD

*I authorize SSAT to charge my credit card the above registration fees. Fees are payable via MasterCard, Visa, AMEX or check (US banks only). Checks are payable to SSAT.*

      CHECK (enclosed)



**Security Code:** \_\_\_\_\_ (See card image above) Where is your Card Security Code? Your credit card's security code is a 3- or 4-digit number located on the front or back of your credit card.

**Credit Card #:** \_\_\_\_\_

**Expiration Date:** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_  
(If not the same as address listed above)

**Signature:** \_\_\_\_\_

#### CANCELLATION POLICY

Cancellations cannot be made via the online website or telephone, but must be made in writing (email, fax, or mail) to the SSAT Administrative Offices: 500 Cummings Center, Suite 4400, Beverly, MA 01915, USA. You may [contact SSAT](#) to email your correspondence. If written notice of cancellation is received on or before January 4, 2018, the registration fee, less a 50 USD administrative fee, will be refunded after the meeting. No refunds will be issued for cancellations received after January 4<sup>th</sup>. Fees cannot be reduced for partial attendance.

**Please return this form via fax to: 978-524-0461, or mail to: SSAT Registration, 500 Cummings Center, Suite 4400, Beverly, MA 01915, USA.**